



REPUBLIC OF SOMALILAND



SOMALILAND NATIONAL AIDS COMMISSION
SOLNAC

NATIONAL HIV/AIDS COORDINATION FRAMEWORK

Message From the Executive Director

The government of Somaliland made a commitment to end AIDS as cross cutting threat by 2022, eight years ahead of the global HIV/AIDS target set for 2030. this commitment is outlined in the Somaliland National HIV/AIDS Strategy plan 2021-2023. To realize the ambitious strategies and targets of the NSP, a decentralized and multispectral approach that involves all key stakeholders – government, civil society, people living with HIV, private sector, donors, development partners, regional, and community level structures, will be adopted to coordinate and deliver targeted HIV services to all people to achieve the goals of the NSP.

Abbreviations

| ABBREVIATIONS TABLE | |
|----------------------------|---------------------------------------|
| DO | District officer |
| IEC | Information, Education, Communication |
| RL | Religious Leaders |
| AIDS | Acquired Immune Deficiency Syndrome |
| CSOs | Civil society Organizations |
| DAC | District AIDS Committee |
| HIV | Human Immunodeficiency Virus |
| M&E | Monitoring & Evaluation |
| MDA's | Ministries, Departments and Agencies |
| MOUs | Memorandums of Understanding |
| NGO | Non-Governmental Organization |
| NSP | National HIV Strategic Plan |
| PLWHAs | People Living with HIV and AIDS |
| MTCT | Mother to Child Transmission |
| SOLNAC | Somaliland National AIDS Commission |
| STIs | Sexually Transmitted Infections |
| UN | United Nation |
| VCT | Voluntary Counseling and Testing |

Executive Summary

at first time, 2005 president Dahir Riyaal kaahin Established government regulating body with the Decree No, 88 of 28 June 2005, after the Government realized that the AIDS epidemic was not only a health problem but also a development issue cutting across all sectors. Consequently, a multi-sectoral response was initiated and placed under the Somaliland AIDS Commission (SOLNAC), established as an independent body to coordinate the multi-sectoral national response. In line with the multi-sectoral response the develop and Endorse a National HIV and AIDS Policy Framework and Strategic Plan by the government.

The government of Somaliland was in the frontline of the fight against HIV/AIDS and other STIs. International development partners are central in the provision of technical and financial support and civil society and the private sector play a vital role. However, the final responsibility for leading and coordinating national efforts to prevent and control HIV/AIDS and STIs and mitigating its impact rests with governments. HIV/ AIDS and STIs was a political priority for the Government of Somaliland (GOS). therefore,

in 2003, the government established, the HIV/AIDS National Technical Committee (NTC) under the tutelage of an Inter-ministerial Committee (IMC) chaired by then vice president.

Two years later, the president of Somaliland established government regulating body with the Decree No, 88 of 28 June 2005, the a national HIV/AIDS commission which will plan and coordinate multi-sectoral efforts to curb the spread of the pandemic in the region. The commission would also design strategies for providing affordable and effective drugs to those living with HIV/AIDS and to lead a concerted campaign to reduce the spread of HIV transmission, mitigate its impact on the infected or affected people, raise awareness in the community about the risk behaviors and methods of prevention.

the established commission comprise 14 members drawn from governmental and nongovernmental organizations, civil society groups, the religious sector and the HIV-positive community, will chair the National AIDS Commission. It will have a full-time secretariat headed by an executive secretary.

later on, 2014, the Somaliland parliament passed establishment act of Somaliland National AIDS Commission (SOLNAC), Headed by the president as chairman and Advisory committee which comprises 7 members designated by the SOLNAC Act 2014. Its membership include representation from Ministry of health, ministry of education, ministry of justice, ministry of religion, ministry of labor and social affairs, ministry of youth and sports. and Executive Directory leading the executive director and four directors.

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CHAPTER ONE INTRODUCTION

1. INTRODUCTION

1.1. Background

Somaliland has developed a National HIV Strategic Plan and M&E Framework 2021 to 2023 to guide the HIV response in the next three years. The NSP will be implemented through a multi-sectoral approach that involves all key sectors – government, civil society, private sector, traditional sector and development partners; and a decentralized approach involving regional and community level structures. The SOLNAC has established coordination structures at national and decentralized levels to harmonize the efforts of the all stakeholders to ensure they all work towards a common goal. The coordination framework provides a platform to harness the comparative advantage of each stakeholder to advance the fight against the HIV epidemic.

Somaliland National AIDS Commission (SOLNAC) is the agency mandated for coordinating national efforts to combat the HIV/AIDS epidemic. SOLNEC which aims to increase and improve strategies for the prevention of HIV/AIDS and the treatment, care and support of those infected and affected with the virus.

1.2. Rationale for the HIV Coordination Framework

Through the Coordination Framework, SOLNAC will manage the response environment and processes, and guide all partners in order to ensure synergy of action by maximizing the comparative advantages of each player. The coordination will also entail ensuring compliance with the provisions and priorities of the National Strategic Plan. Development partners' coordination will largely entail streamlining and coordinating approaches of various partners to be in line with the national approach. It also entails harmonization of different policies, procedures, systems and cycles in line with the national priorities. The ultimate aim will be to enhance the national response and facilitate scaling up.

The rationale for the development of the HIV coordination framework is as follows:

1. The NSP 2021-2023 has set out the vision of Ending AIDS as a public health threat by 2023 and has defined new strategic directions to super-fast track implementation to realize this vision. The coordination framework is being reconfigured to effectively coordinate all stakeholders towards this vision, integrate HIV into existing structures at community level focusing on use of granular data for programming.
2. A mechanism to mobilize and realign resources to priorities that best serve the HIV response which needs to put in place
3. The Government has demonstrated political and policy level commitment to the HIV response through setting a clear vision, providing leadership and committing funding. The coordination framework seeks to sustain this level of commitment as the country gets into the “last mile” in the HIV response.

1.3. Objectives

The objectives of the HIV/AIDS response coordination framework are to:

- Ensure the roles and responsibilities among institutions and stakeholders and sectors at national and decentralization are clearly defined
- Reconfigure the coordination framework to put communities at the centre of the response and improve the focus on local HIV needs
- Maximize efficiency and effectiveness, strategic partnerships, stakeholder participation and accountability at all levels of the HIV response delivery chain end of AIDS by 2030 Vision

1.4. Guiding Principles

The coordination framework aims to provide an enabling environment with guiding principles that recognizes the diversity of partners in terms of government leadership, integrated planning, responsibility for service provision, equity in resource allocation, transparency and accountability:

Government leadership: Government to have the overall responsibility for HIV and AIDS policy formulation through a consultative process with all stakeholders. Effective representation of stakeholders in appropriate fora at different levels will help ensure consensus building and ownership.

Integrated planning: The national strategic plan based on a national policy is be the guiding document for the overall response towards HIV and AIDS in Somaliland. All operational plans at different levels of implementation would have to be aligned to the response as set out in the national strategic plan.

Responsibility for service provision: Responsibility for service provision in the country is guided by the National HIV and AIDS policy, and the decentralization strategy adopted by the Government. In negotiating and making agreements for service provision SOLNAC and all stakeholders will rationalize the comparative advantage of different stakeholders, and harness synergies between stakeholders in order to reduce any duplication and overlaps.

Stakeholder involvement: The coordination framework puts in place platforms through which stakeholders at all levels can share information and lessons learnt and jointly plan and review implementation of the NSP.

Use of existing structures: As much as possible, the HIV response coordination utilizes existing structures to ensure sustainability. The capacity of existing structures, particularly at community level, will be strengthened to integrate HIV.

Equity in resource allocation: SOLNAC will ensure that allocation of resources for HIV and AIDS activities is in accordance with evidence based national priorities, and reduces economic barriers that prevent access to services. Intervention gaps will be identified and resources targeted where they are most needed to make significant impact.

Transparency: Resource allocation for HIV and AIDS would be jointly determined through transparency in planning operations and programme reviews, and sharing information Inputs available to Implementing Partners as well as their capacity to mobilize additional resource would be mutually disclosed.

Accountability: All partners in the response are ultimately accountable to the communities served, in accordance with their mandates. Tracking of the responses will be through an agreed M&E system, and official accounting to various constituencies on progress would be an integral part of the response. SOLNAC will ensure accountability for inputs, outputs, and outcomes by all Partners at different levels through a national monitoring and evaluation framework.

Holistic coordination: The coordination framework focuses on all aspects of the response – program, policy, strategy, financing, planning, coverage, research, monitoring and reporting.

1.5. The structure of the coordination framework

The coordination framework shall define and outline the types or pillars of coordination, structures, operational mechanisms and provide guidance on the transformation of some coordination entities to their new roles in the new coordination framework. It shall outline the national HIV and AIDS multi-sectoral coordination mechanism that facilitates sectoral, programmes, resources and decentralized coordination.

GOAL : All HIV and AIDS programmes aligned to the national strategic plan and coordinated through the SOLNAC, and reports systems aligned to one M&E framework, to avoid duplication and overlaps, inappropriate strategies and resource allocations.

Objectives: The coordination framework aims at achieving the following objectives:

- To identify focal areas for coordination with clear mandate at all levels;
- To strengthen capacities of the coordinating structures;
- To establish stronger partnerships and synergies with relevant stakeholders;
- To facilitate and promote ownership and support to the national response by all stakeholders

CHAPTER TWO

NATIONAL COORDINATION PILLARS

2. STRATEGIES FOR COORDINATION

The principal tool for the coordination of the national HIV response is the “three ones” principle.

- ✓ This incorporates the three pillars of coordination, namely
 - I. *one National Coordinating Authority(SOLNAC),*
 - II. *one National Strategic Plan (NSP) and*
 - III. *one National Monitoring and Evaluation (M&E) System.*
- ✓ The HIV Policy: The **Somaliland National HIV/AIDS Policy** defines the functions of coordination to include policy development, oversight, planning and programme development and monitoring and evaluation of the response. The coordination framework established structures and processes for implementing the HIV policy.

2.1.National Coordination Pillars

The national HIV and Response has 4 coordination pillars: resources, sector, programmes and decentralization/geographic coordination. These are distinct but interrelated Area of coordination that must be linked for effective response coordination. Sectors implement the programme in decentralized geographic locations. This is facilitated by resources: financial and technical. The response coordination in these areas shall be facilitated by SOLNAC to ensure effective delivery of the programme by sectors at decentralized and geographic levels. The coordination mechanism in figure 2 outlines how this coordination is implemented.

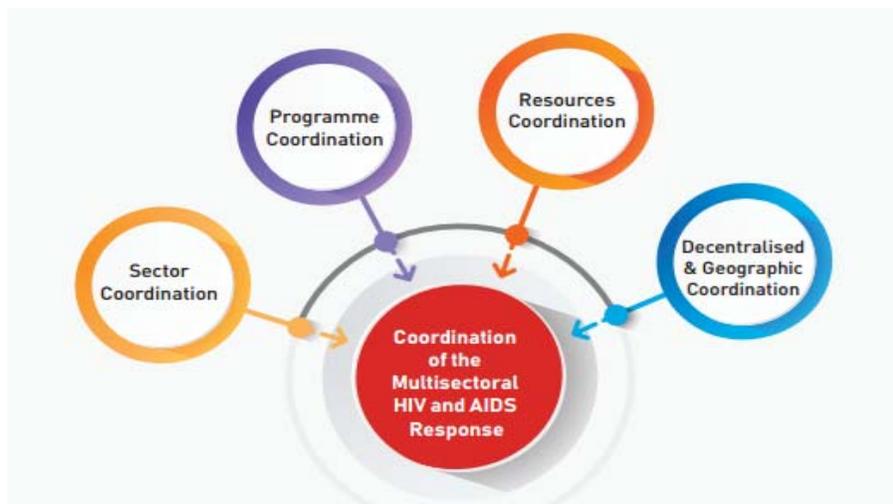
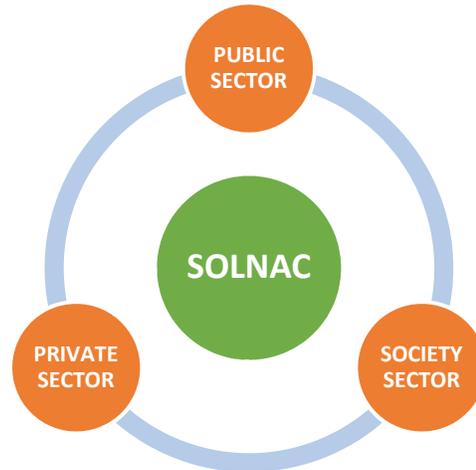


Figure 1:Coordination Pillars

2.1.1. Sector Coordination

A sector is the grouping of implementers according to their industry, aims and goals. Sector coordination is to facilitate sectors to develop, implement and monitor their responses aligned to the Somaliland HIV National Strategic Plan and M&E Framework 2021 to 2023. There are 3 **sectors: private, public and civil society sectors**. The agencies within these sectors are charged with the responsibility to implement HIV and AIDS programmes and interventions within their



mandates Coordinating by the SOLNAC.

Figure 2:Sector coordination

2.1.1.1. Public Sector

The public sector comprises of 7 ministries designated by the SOLNAC Act 2014. Its membership include representation from Ministry of health, ministry of education, ministry of justice, ministry of religion, ministry of labor and social affairs, ministry of youth and sports.

- Provide a formal and representative coordination platform for discussion, consensus building, join and mutual support for constituencies in the national response to HIV and AIDS
- Encourage stakeholders and constituencies to harmonize the national response.
- Provide communication channel for more effective information sharing within the various constituencies in the society
- Recommend the commission, the emerging policy and programme issues and challenges
- Advise the commission on the implementation of the national strategy
- Advocate demystification of HIV and AIDS, and the removal of stigma and discrimination associated with HIV and AIDS; and for the protection of rights of orphans and other vulnerable groups
- Encourage constituencies to submit annual action plans and indicators in relation to the implementation of the national response to HIV and AIDS.

2.1.1.2. *Civil Society Sector*

Civil Society organizations (CSOs) present unique advantages, such as responsiveness to community and grassroots needs, committed and motivated human resources, ability to work within marginalized populations, flexibility and minimal bureaucracy and hence speed of action, and are able to take risks. On the other hand, the proliferations of CSOs sometimes take place in expense of quality and accountability, or inappropriate projects absorbing scarce resources. In that regard specific coordination mechanisms are critical to ensure effective responses. Consequently coordination strategies to be considered by SOLNAC include:

- Establishment of networks of similar societies such as networks of NGOs, FBOs, and CBOs that would help in collapsing the large numbers of organizations involved.
- Development and review of a coordinating plan that takes into account the peculiarities of civil society groups or organizations.
- Facilitation of the development of CSOs strategic plans based on the national HIV and AIDS strategic framework, and alignment of sector activities to the NSP.
- Definition of specific roles of CSOs in the national AIDS action plan.
- Establishment of mechanisms to ensure equity in the community and geographical distribution of HIV and AIDS services provided by CSOs.
- Mechanisms for regular meetings for sharing information and feedback within the sector, and interacting with other players and SOLNAC.
- Establishment of clear policy regarding SOLNAC involvement in capacity development among CSOs.

SOLNAC shall strengthen existing civil society partnerships and encourage various partners to form network forums to share information and experiences, report on progress and analyze and resolve operational problems.

2.1.1.3. *The Private Sector*

The strength of the private sector in the response to HIV and AIDS lies in the financial resources and at times human resources that can be tapped, as well as communication skills, professional business-like approaches and a culture of efficiency, and cost-effectiveness and accountability. Given the diverse interests represented in the business sector, coordination and ensuring optimum utilization of available resources and skills is essential. Coordination strategies specific to the private sector include:

- Facilitation of a national business coalition on HIV and AIDS, made up of as many business enterprises as possible.
- Development of a private sector strategic plan based on national HIV and AIDS strategic framework; and a specific role of the sector clearly defined in the national AIDS action plan.
- Development of business sector coordination plan that is agreed upon by the coalition and reviewed regularly.
- Regular meetings and feedback within the sector for purposes of sharing information and reviewing the sector's progress in the response.

- Membership of a partnership forum which provides opportunity for interaction with other partners and SOLNAC

In the same respect the SOLNAC shall strengthen the existing private sector networks and partnerships in order to promote a directed and strategic response from this constituency.

2.1.2. Programme Coordination

Programme coordination is facilitating the implementation of the HIV and AIDS programmes or interventions by the sectors.

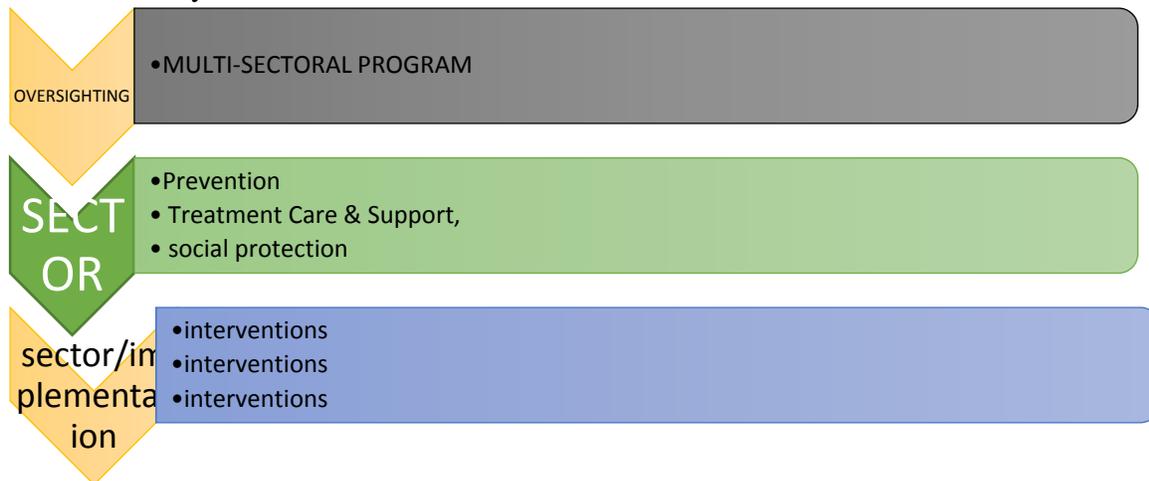


Figure 3: Program coordination

- Multi-sectoral level programme coordination:** This level leads the development of the multi-sectoral HIV and AIDS response and guides sectors to implement, periodically reviewing progress to ensure that targets and the goals are met. Further, this is where the situational thinking and social impact of HIV and AIDS will be unpacked. This is the responsibility of SOLNAC.
- Sector level programme coordination:** This level of coordination is performed by sectors. This is where sectors develop, implement and monitor sector responses working with implementing partners. It is a level that is responsible for implementing the Prevention, Treatment, Care and Support, and the Social Protection programmes of the NSP. Each programme consists of interventions.

2.1.3. Resources Coordination

This is the facilitation of the HIV and AIDS Response financing. Sustainable financing of the HIV response is a key strategic focus for the NSP 2021-2023. Donors and development partners play a key function in providing resources for the implementation of the national operation plan. Capacity development on resource mobilization is key to partners and sector response. Sectors will be assisted to develop their resources mobilization plan that address the resource needs for the response.

2.1.4. Decentralized Coordination

It is the facilitation of implementation, monitoring and reporting of the HIV and AIDS response at District levels using existing multi-sectoral coordination structures. The coordination framework sets out a approaches of decentralized coordination

CHAPTER THREE

MULTI-SECTORAL HIV AND AIDS COORDINATION STRUCTURES

3. MULTI-SECTORAL HIV/AIDS COORDINATION STRUCTURES

Multi-sectoral HIV and AIDS Coordination structures are bodies that shall ensure that the AIDS response is coordinated. There are national, regional and District level structures that coordinate the multi-sectoral HIV response. At national level, multi-sectoral HIV/AIDS coordination structure is Somaliland National AIDS Commission (SOLNAC), Headed by the president as chairman and Advisory committee which comprises 7 members designated by the SOLNAC Act 2014. Its membership include representation from Ministry of health, ministry of education, ministry of justice, ministry of religion, ministry of labor and social affairs, ministry of youth and sports. and Executive Directory leading the executive director and four directors.

Figure 4 below, outline structures from the top level of government to the communities at the bottom of the structure

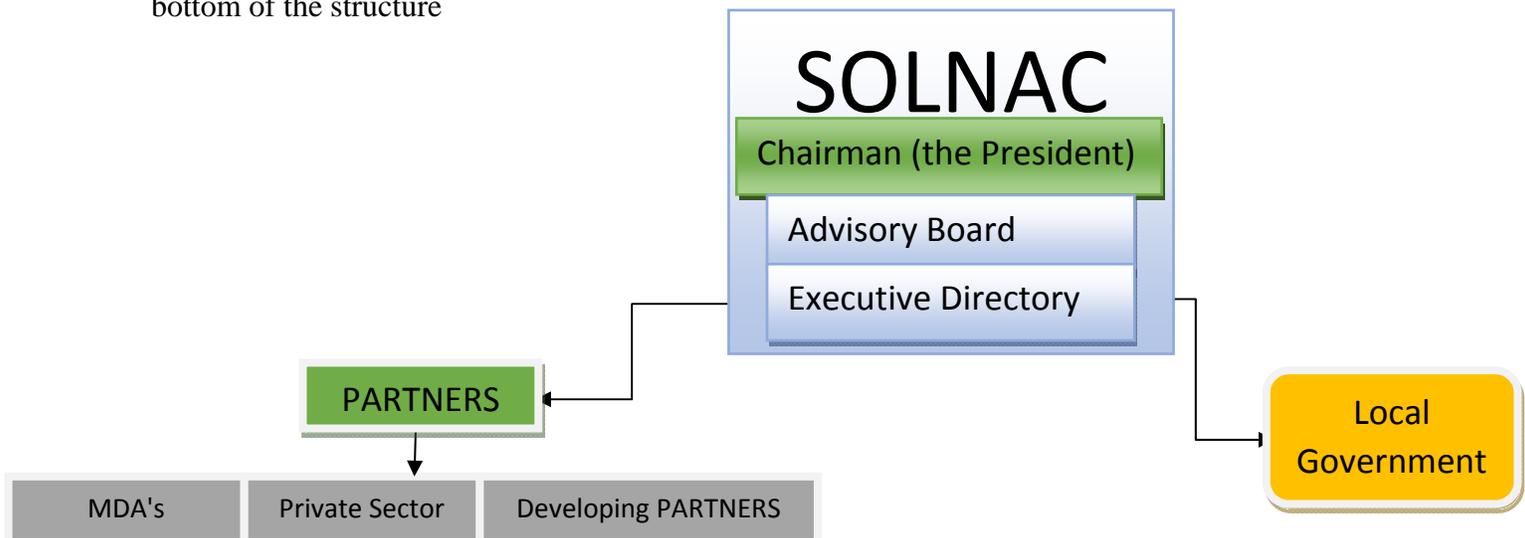


Figure 4: Multi-sectoral HIV/AIDS Coordination framework

3.1. NATIONAL LEVEL

3.1.1. THE PRESIDENT (CHAIRMAN OF SOLNAC)

The President's Office provides the highest political leadership for the HIV response through supporting and reinforcing SOLNAC's role as a multi-sectoral coordinating agency for the HIV response in the country.

3.1.2. ADVISORY BOARD

The Commission has an advisory function through its HIV and AIDS Forum which comprises 7 members designated by the SOLNAC Act 2014. Its membership include representation from Ministry of health, ministry of education, ministry of justice, ministry of religion, ministry of labor and social affairs, ministry of youth and sports.

Key functions of the forum are to:

- Provide a formal and representative coordination platform for discussion, consensus building, joint and mutual support for constituencies in the national response to HIV and AIDS
- Encourage stakeholders and constituencies to harmonize the national response.
- Provide communication channel for more effective information sharing within the various constituencies in the society
- Recommend the commission, the emerging policy and programme issues and challenges
- Advise the commission on the implementation of the national strategy
- Advocate demystification of HIV and AIDS, and the removal of stigma and discrimination associated with HIV and AIDS; and for the protection of rights of orphans and other vulnerable groups
- Encourage constituencies to submit annual action plans and indicators in relation to the implementation of the national response to HIV and AIDS.

3.1.3. EXECUTIVE DIRECTORY (SOLNAC)

Executive Directory is responsible for the day-to-day coordination of the HIV response reporting to the office of the President. It ensures that all sectors are implementing an integrated HIV response within their mandate. Further it provides oversight coordination and is responsible for facilitating the delivery of the Somaliland HIV National Strategic Plan and M&E Framework 2021 to 2023.

The National AIDS Commission as the National Coordinating Authority will ensure that all partner activities are based on national priorities as articulated in the NSP, which is the central reference point for national response priorities for action and funding. This will ensure that interventions and activities are based on agreed strategies and directed at agreed national objectives. National Action Plan and annual operational plans will drive implementation and alignment, in which the roles of all partners, expected results, cost, and sources of resources are agreed and clearly documented. Such plans will be based on the NSP and developed in a participatory manner involving all partners in the response. This will facilitate division of labor where each partner focuses according to their comparative advantage, and avoid duplication and competition among partners.

SOLNAC, jointly with partners, will track the progress of the response and evaluate the results against agreed targets and using the agreed national M & E system. The results will inform reviews of the NSP and action plans. Ultimately SOLNAC through appropriate organs of government will be accountable to affected communities and the nation at large for effective prevention, treatment, care and support.

To achieve its role as the national body responsible for coordination of the HIV and AIDS response, SOLNAC is mandated to guide and direct establishment of structures for effective coordination of the multi-sectoral response. The pillar of such an effective structure would be the formation of a National Stakeholders Forum with membership from Government institutions, Non-governmental Organizations, Civil Society Organizations, Private Sector, Youth Groups, Professional Associations, Religious Institutions and Organizations of People Living with HIV

and AIDS (PLWHAs). This forum will facilitate regular interaction of leading actors involved in managing and supporting various HIV programmes in the country. It would also provide a platform for planning and review of annual programmes, responsibilities and lead implementing agencies, progress and resource allocations and modalities for accountability.

SOLNAC will support partnerships among stakeholders led by national Self Coordinating Entities with the mandate to share information, design strategic directions, determine modalities for resource allocation and delegate representations to the wider stakeholder forum. Monthly or quarterly reports, as determined by different entities, would be shared with SOLNAC and the multi-sectoral forum. These will include coordination structures with the Public Sector, Civil Society organizations, Private Sector and Development Community. From time to time the SOLNAC will be better positioned to coordinate national initiatives on HIV and AIDS e.g. the Know Your Status Campaign Steering Committee, the World AIDS Day preparations etc.

The SOLNAC is responsible for establishment/reviving the four Thematic Teams on HIV and AIDS. The expert teams play an advisory role and oversee interventions in each thematic area. These teams include Prevention; Treatment, Care and Support; Impact mitigation; Management & Coordination.

Prevention Thematic Team: The prevention thematic team will advise on issues related to policies, strategies and activities for promoting safe behavior change including Information, Education, Communication (IEC) and advocacy, condom promotion and availability, blood safety, PMTCT, VCT, prevention and management of STIs, post exposure prophylaxis and infection control (e.g. health facilities, traditional/cultural practices etc).

Treatment, Care and Support Thematic Team: Key areas of this thematic team include policies, advocacy, strategies and activities related to clinical case management including diagnostic facilities, human and institutional capacity, accessibility and availability of drugs for opportunistic infections and ARVs, home based care, palliative care, counseling, rehabilitation and other related issues such as nutrition.

Impact Mitigation Thematic Team: Advisory roles of the impact mitigation thematic team will focus on policies, strategies and activities on mitigation of the HIV & AIDS impact with special emphasis on orphans and vulnerable children, people living with HIV and AIDS, women and girls, impact on the various public and private sectors and advocacy for mitigation interventions. In addition this team will advise on issues related to the prevailing economic context especially in regard to the level of poverty, unemployment and food insecurity and how they impact on impact mitigation interventions.

Management & Coordination/Governance Thematic Team: This team would advise on issues related to: management, coordination and institutional arrangements that is necessary to have an effective, well-coordinated and managed multi-sectoral response at all levels, resource mobilization, funding flows and mechanisms, adequacy, access by stakeholders at all levels and utilization of funds in the national response; and forecast resources for scaling up the national response; financial resource tracking procedures; and issues on financial planning and budgeting, and on programme monitoring and evaluation.

Responsibility of the Financing Institutions

Effective coordination partners including NGOs needs to be optimized as they are significant source of financial, technical and other resources in the national responses. Partners in the category of multi-sectoral institutions and international funding involved in the provision of support include multilateral organizations such as the UN, the Global Fund, the World Bank, and others; bilateral agencies of governments; Foundations; International NGOs; Private sector companies; and Academic institutions. In as much as the effective coordination of the efforts of the funding partners is crucial for cost effective use of the support provided, considerations of differences in the systems and operational modalities, and reporting requirements of different donor's vis-à-vis national systems most must take into account.

3.1.4. PARTNERS

The main aim of coordinating Development Partners is to simplify, streamline and harmonize procedures and practices with a view to improving the effectiveness of country-led national HIV responses and reducing the burden placed on the managerial and technical national capacity by the requirement to transact separately with individual donors. In that regard SOLNAC will provide the relevant strategies to facilitate effective coordination of international partners. These will include:

- Harmonization and alignment: SOLNAC would have to engage international partners in a dialogue to work out modalities for harmonizing the latter's approaches to that of SOLNAC. In particular any support provided should be aligned to the NSP and national priorities, policies, systems, cycles and AIDS action plans.
- Funding modalities: SOLNAC would have to work towards administering a pool account, bearing in mind the separate funding systems of different Development Partners.
- Partner accountability mechanisms: SOLNAC would establish a system of reviewing the performance of all international partners against agreed responsibilities. This would be through a participatory process to develop tools to measure the partners' commitment to the "three ones" concept through harmonized and aligned support. Partnership forums would also serve as a means for partners to account for their performance and systematic sharing of information with SOLNAC and other partners. The M&E plan will serve to provide clear provision for joint programme reviews with concerned partners.

3.2. District Level

The goal of the gateway approach is to provide a platform for all stakeholders including SOLNAC to successfully implement their strategies in the response against HIV and AIDS by involving the communities and their representatives right from the inception and thus to promote community HIV and AIDS initiatives and innovations. The approach is aims to empower and make the local authorities and other local leaders HIV and AIDS competent and to promote a demand-driven support system at local, district and national levels.

Using the Local Authorities as the gateway in Somaliland, the District Councils are assisted by District AIDS Committees that are responsible for all HIV and AIDS issues at district level. In

same manner the Community Councils also have Community Council AIDS Committees, and smaller committees are also established at constituency level.

District Councils: The Councils is responsible for approving the District HIV and AIDS action plans and also overseeing the response at district level, through reports submitted by the Community Councils. The Councils are also responsible for establishing and managing a District HIV and AIDS Information Centre.

District HIV and AIDS Partnership Forum: The forum will be constituted of all sectoral representatives and interested groups in the HIV and AIDS response. It will provide a platform for information sharing and making recommendations to the District HIV and AIDS Committee.

District M&E Officer: The position of the District AIDS Coordinator shall be transformed into an M&E officer. This officer is answerable to the District Administrator and will be responsible for the overall monitoring of policy level issues at the district.

3.3. Local/Community Level

Community Councils: These councils are the entry point for all development issues at this level. Their responsibilities include establishment of the HIV and AIDS Committee, approval of consolidated HIV and AIDS action plans, coordinating the monitoring of HIV and AIDS activities implemented by various stakeholders, approval of registration of CBOs and promoting community HIV and AIDS initiatives and innovations.

3.4. Strengthening the Capacity of Coordinating Structures

Following the definition of the framework, SOLNAC will work together with the identified multi-sectoral and self-coordinating bodies to review their mandates and ensure their legal status is defined. SOLNAC will assess the capacity needs of the coordinating structures and based on these it will facilitate capacity building of these structures to ensure that they can execute their revised mandate effectively. This will include while not limited to: human resource skills and numbers, financial management, presentation and report writing skills, organizational needs etc. It will also be necessary to look into the sustainability issues of these bodies. It is the mandate of SOLNAC to ensure that the affiliated structures work in harmony with their coordinating body.

3.5. Institutionalizing Stronger Partnerships and Synergies

SOLNAC will strategize in institutionalizing partnerships through formalization of responsibilities and arrangements. Formalization of the delegated responsibilities to the coordinating structures will ensure commitment and accountability and thus strengthen the partnership. SOLNAC will engage itself and its partners in employing the following tools in an attempt to strengthen the partnerships.

Code of Conduct: The Code of Conduct will facilitate a mechanism for SOLNAC to play a leading role in defining the financing strategy that will facilitate a harmonized national response. The Code of Conduct specifically targeted towards the Development Partners and International/Local Organizations will aim at ensuring harmonization, avoiding duplication, and identifying gaps in the financing of the national response. The Code of Conduct will encourage the entry point at central level to be SOLNAC, while at district level the District Councils will be the entry point.

Memorandum of Understanding: SOLNAC will ensure that Memorandums of Understanding (MOUs) are entered into with relevant stakeholders both at central and district levels. The MOUs will stipulate the intentions, policies and principles which will govern the collaboration. The MOU will ensure

institutionalization of the working arrangements, provide guidance for agreements between the sector specific bodies and their affiliates, stipulate the M&E requirements at each level, and ensure accountability and transparency.

Agreements and Contracts: SOLNAC will mandate the identified coordinating structures to enter into agreements and contracts with their affiliates. The agreements will specify what each Implementing Agency is contributing towards agreed cluster specific objectives. The agreements will be aligned to the MOUs that the coordinating structures have entered into on behalf of the Implementing Agencies. This will ensure that the coordinating bodies can comply with the requirements of the MOUs.

Accreditation: SOLNAC will mandate the coordinating structures to ensure that all service providers are accredited by relevant professional bodies in Somaliland for all services rendered.

Registration: In the same facet SOLNAC will mandate the coordinating structures to ensure that all service providers are registered under the relevant professional bodies in Somaliland for all the services rendered.

3.6. Facilitation and Promotion of Ownership of, and Support to, the National Response by all Stakeholders

Strategic Planning: The National AIDS Policy and Strategic Plan will be the guiding documents for the coordinated response to HIV and AIDS in Somaliland. The SOLNAC through assistance of the multi-sectoral coordinating structures will assist in ensuring that all the sector specific efforts are informed by the national strategy, and that all operational plans of the Implementers are integrated into the sector specific mandates and therefore the thematic areas. This therefore calls for joint participatory planning and budgeting sessions of stakeholders at different levels. SOLNAC is mandated to facilitate the institutionalization of this process into the routine of all stakeholders and a planning and budgeting cycle will be defined to guide the process. This will ensure that the comparative advantage of different stakeholders is maximized, overlaps are ironed out, and gaps identified and addressed. This will in the long run ensure comprehensive coverage for all segments of the population.

Financing: SOLNAC is mandated to mobilize resources in order to finance the implementation of the national strategic plan. All resource mobilization efforts for the coordinated response will be channeled through SOLNAC. This will ensure that SOLNAC is aware of the resource envelop and can therefore effectively manage the coordinated response. The ideal strategy, as defined by the policy, is to have pooled resources “basket funding”. However, SOLNAC with all stakeholders will jointly guide the utilization of ear marked funding. Resources will be allocated based on a defined resource allocation criteria informed by available evidence. This will ensure that resources are targeted according to jointly set priorities and where they are mostly needed. SOLNAC will ensure annual joint planning, budgeting and financing of the national response by all stakeholders in accordance with the HIV and AIDS FUND Grants policy.

Monitoring & Evaluation: The SOLNAC agrees on an M&E framework to measure the performance of the national response as defined in the national strategy. Reporting requirements will be agreed upon and organizations will be capacitated to meet the reporting requirements. Joint reviews of Programmes will also be facilitated through the SOLNAC.

CHAPTER FOUR

COORDINATING MECHANISMS

4. COORDINATION MECHANISM

The national coordinating mechanisms are the instruments used by the coordinating organs of the HIV response.

4.1. National Advisory Committee

The Commission has an advisory function through its HIV and AIDS Forum which comprises 7 members designated by the SOLNAC Act 2014. Its membership include representation from Ministry of health, ministry of education, ministry of justice, ministry of religion, ministry of labor and social affairs, ministry of youth and sports.

Key functions of the forum are to:

- Provide a formal and representative coordination platform for discussion, consensus building, joint and mutual support for constituencies in the national response to HIV and AIDS
- Encourage stakeholders and constituencies to harmonize the national response.
- Provide communication channel for more effective information sharing within the various constituencies in the society
- Recommend the commission, the emerging policy and programme issues and challenges
- Advise the commission on the implementation of the national strategy
- Advocate demystification of HIV and AIDS, and the removal of stigma and discrimination associated with HIV and AIDS; and for the protection of rights of orphans and other vulnerable groups
- Encourage constituencies to submit annual action plans and indicators in relation to the implementation of the national response to HIV and AIDS.

4.2. Programme Management Committee

A Programme Management Committee will be set up that will comprise of all Directors of SOLNAC. This committee shall work to ensure implementation and track progress of the NSP. The meeting of this committee will precede the Advisory Committee.

The meeting shall table and approve the Sector performance. The role of this committee will be:

- Approve sectors plans.
- Assessing progress towards achievement of NSP targets
- Reviewing and recommending target adjustments as necessary to the inter-sectoral committee
- Facilitating the cascading of NSP targets to programmes and regional level
- Providing reports to the high-level oversight Committee

4.3. Sector Programme Coordination

The programmes shall be the response coordination operational mechanisms in the government ministries. This is where public sectors will develop, implement and monitor sector responses working with implementing partners. Each sector will be responsible for implementing the Prevention, Treatment, Care and Support, and the Social Protection programmes of the NSP. Each programme consists of interventions.

4.4. Regional HIV/AIDS Committee

4.5. District AIDS Committees(DAC):

The Committee at this level shall be called the District AIDS Committee (DAC). The DAC shall be chaired by the Mayor and Vice-chair person shall be the chairman of social sub-committee council . The Secretary for the DAC shall be the Somaliland Aids Commission District Officer (DO).

Composition of the DAC shall include all members of the District Executive, all the Ministries district officer, the Council Speaker and representation of the Policy Leaders of Civil Society Organizations (CSOs) and the Private Sector. CSOs include: Religious Leaders(RL), Non-Governmental Organizations (NGOs), Networks of Persons Living with HIV/AIDS (PHAs) and cultural institutions.

. The mandate of the committee is to:

- Consolidate the district HIV and AIDS Plan for submission to the District Council
- Consolidate inventory of all respective implementers involved in HIV and AIDS activities
- Appraise and authorize proposals for funding from respective implementers
- Ensure coordination of HIV and AIDS activities at all Community Councils
- Develop M&E Plan aligned to the district action plan
- Monitor the District Information Centers
- Consolidate quantitative and qualitative reports from the implementers for submission to the Community Councils, Central Government and the SOLNAC

4.6. Community AIDS Committees:

These committees are multi-sectoral and comprise members from CSOs, locally based public officers and FBOs. They have the mandate to coordinate implementation of all HIV and AIDS activities, ensure stakeholder involvement in planning, compile reports and disseminate them to the District AIDS Committee, appraise proposals from locally based NGOs, CBOs and RL

CHAPTER FIVE: COORDINATION RESPONSIBILITIES AND IMPLEMENTATION ARRANGEMENT

Figure : Coordination Responsibilities Flow

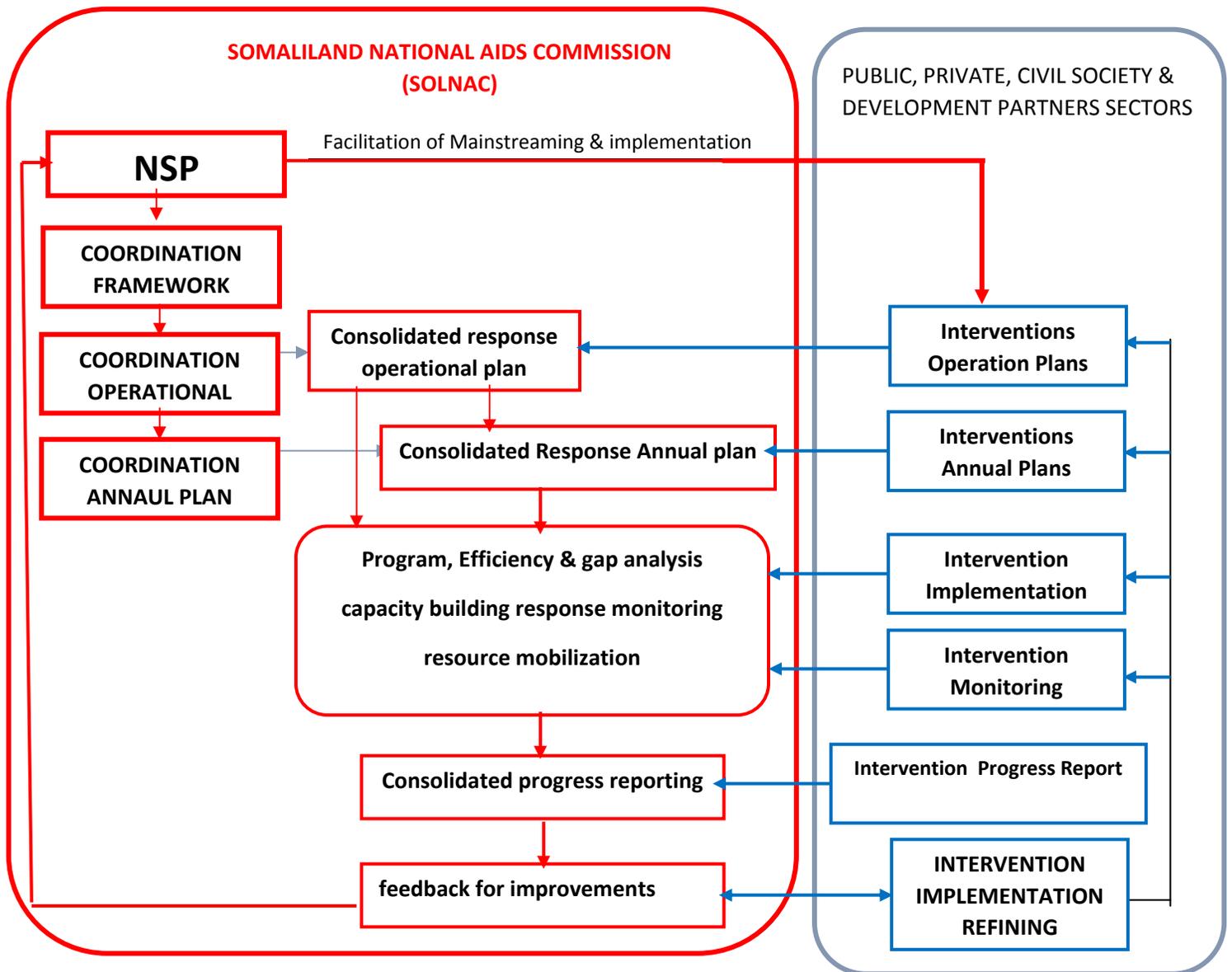


Figure 5: Implementation Arrangements

| s/n | Implementation Arrangements | | | | | | | | | | | | |
|-----|-----------------------------|---|---|---|---|------|---|---|---|------|---|---|---|
| | Activity | 2021 | | | | 2022 | | | | 2023 | | | |
| | | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1 | Planning | NSP Development | ■ | ■ | | | | | | | | | |
| | | Operational Plans | | | ■ | | | | | | | | |
| | | Annual plans | | | | ■ | | | | | | | |
| 2 | Coordination | Establish new coordination mechanisms | ■ | ■ | ■ | ■ | | | | | | | |
| | | conduct high level coordination | | | | ■ | | | | | | | |
| | | conduct programme coordination meetings | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| | | conduct TWG meetings | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| 3 | Implementation | Resource Mobilization | ■ | ■ | | | ■ | ■ | | | ■ | ■ | |
| | | Capacity building | ■ | ■ | ■ | ■ | | | | | | | |
| | | Programme implementation | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| 4 | Evaluation | Annual Reviews | | | | ■ | | | | ■ | | | ■ |
| | | Mid term Review | | | | | | ■ | ■ | | | | |
| | | Summative Evaluation | | | | | | | | | | ■ | ■ |

Reference resources:

1. Somaliland National Development Plan II
2. Somaliland HIV National Strategic Plan and M&E Framework 2021 to 2023
3. Somaliland National HIV/AIDS Policy
4. The Kingdom of Eswatini National HIV and AIDS Multi-sectoral Response coordination Framework
5. Lesotho National HIV coordination Framework

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