

**TWG Review and Reporting Template**  
**TWG Network Meeting**  
**27-28 February**

Name of TWG: .....on HIV/AIDS.....

**General guidance for using the template**

This template is designed to support and complement the dialogue that will take place during the TWG Network meeting on 27-28 February 2012 in Sihanouk Ville. It is intended to ensure that each TWG can make progress in promoting development results and partnership as well as to provide inputs into national-level policy work on development effectiveness, partnerships and results-based cooperation.

The following notes provide an overview of the template and its use:

1. The template includes three main reporting areas based on the meeting agenda:
  - a) Managing for Development Results, monitoring and mutual accountability
  - b) Use of PBAs to promote development effectiveness and strengthen country systems
  - c) Promoting effective partnership and dialogue mechanisms
2. The template can be used for:
  - a) Preparation between TWG Chairs and development partners before the meeting.
  - b) Assessing progress and recording new commitments during the meeting.
  - c) A basis for discussion amongst the entire TWG membership after the meeting.
3. The TWG Network meeting agenda provides an opportunity for dialogue on each of the three main reporting areas. Group work will allow each TWG to consider its own work in detail while plenary discussion encourages TWGs to share ideas based on their own needs and experience in order to identify agreements and future actions.
4. Individual participants may use the template to organise their own ideas before each TWG consolidates a final template at the end of the meeting. Each component of the template can be completed, reviewed and revised as the meeting progresses and new ideas are shared. This will comprise the final set of results – agreements, commitments, recommendations, actions - for each TWG together with recommendations for national-level policy work.
5. During the final plenary session of the meeting, TWGs will be asked to summarise the highlights of their discussion and to share agreements, recommendations and proposed actions with other members of the TWG Network.
6. CRDB/CDC will use the completed templates to prepare a report on the meeting and to inform future support to TWGs. Each TWG can use their completed templates in future TWG meetings to share findings with all TWG members in order to validate the results and ensure they are followed-up as part of the TWG work programme.

**Note**

*This template is designed to structure discussion and help to identify future areas of work related to the development effectiveness agenda. It can be filled in by hand or electronically. Not all questions need to be addressed if they are not relevant while other issues can be added according to the requirements of the TWG or sector.*

**Please return this completed template to CRDB/CDC at the end of the meeting**

## 1. Managing for Development Results, monitoring and mutual accountability

Results-based approaches are increasingly understood and used in Cambodia, at national level through the NSDP monitoring system, within sector programmes, and at individual project level. The JMIs have also been adapted to become increasingly results-focused at the outcome and output level and provide the main entry point for monitoring a partnership between the Government and its development partners that encourages mutual accountability.

During the TWG Network retreat, the monitoring session provides an opportunity to consider the strengthening of individual monitoring arrangements – national, sectoral, reform-related, project level – and, perhaps more importantly, the linkages between them. In particular, the forthcoming revision of the NSDP, in line with the Royal Government's next mandate, provides an opportunity to strengthen national ownership and to promote the alignment of external assistance. This can be achieved through the use of a national results framework that is based on the NSDP but also linked to sectoral results frameworks as well as informing the use of JMIs and the structure of project monitoring arrangements. This will also be in line with the Busan commitment – endorsed by delegates of all partner countries and development partners – to the use of national results frameworks.

### Questions for review

A1. Does the sector have a results framework? If yes, what is its relationship to the following:

Ans. Yes (as we have NSP on HIV/AIDS, GARP, UA, MDG 6)

- a) Sector policy/strategy                    yes
- b) Annual workplan and Budget Strategic Plan                    yes (annual work plan as one of all implementing agencies, but not as leading national agency)
- c) NSDP    yes
- d) JMIs    yes
- e) TWG workplan                                yes (but still need improvement)
- f) Results frameworks of major development partners active in the sector?   Yes (yes for health sector and social sector for some extend and gender very little)

A2. Is the JMI derived from the sector strategy and an associated results framework?

Ans. yes

A3. Are there any arrangements for joint (sector-wide) monitoring and discussion of results based on the sector strategy/plan?

Ans. Yes (eg. Joint annual plan review, GARP, UA)

A4. How do current aid coordination arrangements (PBA, TWG, bilateral consultations) support the promotion of results-based work?

Ans. Yes in the health sector (care/treatment), PBA for an AOCPP need to be developed to assure effectiveness and efficiency and sustainability for the response.

### Issues for discussion and further action

A5. Based on the questions above, what are the priorities (including for training and support) for strengthening results frameworks at sector level as well as their linkage to the JMIs, NSDP and project-level monitoring arrangements?

Ans.

1. Structural institutional issues: reform in architecture of the national AIDS response, taking forward the recommendations of the Functional Task Analysis of the national response –closer harmonization, for example, with Sub-National Democratic Reform structures;
2. Increase ownership, governance and delivery of programming through improved capacity of key national institutions in the response (ministries like MoWA, MoSVY, MoLVT, MoInt, MoEYS and the NACD) and deeper engagement/leadership of community-based organisations in direct service delivery with key affected populations – MARPs, PLHIV (rather than the heavy reliance on costly international development players to deliver);
3. Move from the current “project-based” response to an effective programme-based approach;
4. Move ahead the recommendations of the Cost-Effectiveness Analysis (2011) and the Cambodia 2031 Financing Study (2010) to improve investment (allocative efficiency aimed to avert the most new infections (currently 1,470/year or 4/day) and to prevent the maximum number of AIDS deaths – universal treatment;
5. Continue to work on TRIPS (IP) with MEF, Ministry of commerce, CDC to ensure that key issues like data exclusivity do not hinder Cambodia’s access to generic drugs as Cambodia moves from LCD to MIC;
6. Increase domestic financing for AIDS (GFATM will require the RGC to cost-share 5% in future grants and re-negotiated phases of current grants). Work needs to be done by NAA/DPs to put together a Fiscal Sustainability Management Plan in this respect (as external assistance declines over time and the expectation for domestic resourcing increases).
7. Joint monitoring arrangement through the review of the UA indicators and targets.

A6. Has the JMI recently been up-dated? If not, would it be timely to do so based on 2012 operational plans and performance targets? Could a new JMI be developed in line with a sector results framework? In what ways could the JMI preparation and monitoring process itself be improved?

Ans.

-Yes: revised and updated.

-Yes.

-Three out of the 7 above proposed JMI indicators will be selected: (1). Strengthening the mechanism, (2). PBA and (3) secure resources internally and externally.

A7. Are monitoring targets (outcomes and outputs) effectively linked to the process of programming resources (budgets, annual plans, Budget Strategic Plans etc? (Consider the main strengths of the current arrangements – inter-departmental cooperation etc – and the areas in which the resource-results relationship can be improved).

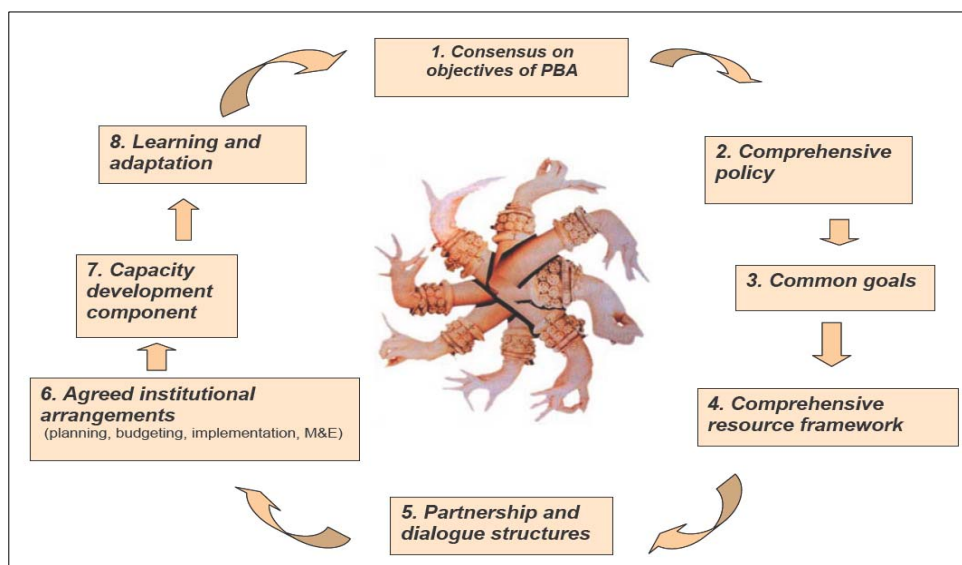
Ans. Yes linked mostly in the health sector (care/treatment where data and planning are better linked) but in other sectors (prevention and impact mitigation), room for improvement is still in need using lesson learnt from the health sector.

## 2. Use of programme-based approaches to promote development effectiveness and strengthen country systems

Programme-based approaches (PBAs) are the Government's preferred tool for implementing sector strategies and core reforms. PBAs are regarded as a mechanism to promote national ownership of development programmes, ensure coherent programming of resources, strengthen national capacities and systems, and, most important, to deliver development results. In its simplest form, a PBA is about getting organised around common objectives to produce the best results. The 2011 Development Effectiveness Report and the Busan Partnership statement emphasise the opportunities of a PBA to address concerns still relevant from the Paris/Accra commitments, as well as to consider new opportunities for effective development afforded by broader partnerships (with the private sector, South-South, civil society) and a focus on development effectiveness.

### Questions and issues for review

B1. The basic components of a PBA are set out below. Discuss the status of each main area of a PBA (or other existing partnership management arrangements) in your TWG/sector. Consider the main focus of work over the past year and priority areas for the year ahead.



Ans. We have done only some following: (5) Partnership and dialogue structures, and (6) Institutional arrangements: FTA, 7 national WG establishment and some administrative orders have been done.

B2. The objective of a PBA (April 2011 training) is "to promote better organisation and better results". Does the PBA, or current partnership management arrangements, make a positive contribution to this objective. Why (or why not)?

Ans. The rationale of having PBA is not well understood both by the government and DPs sides, so the commitment to have consensus on objectives of PBA has not been established.

B3. Has PBA (or more general aid coordination work) promoted the strengthening and use of country systems? How have the major reform programmes contributed to systems strengthening? Which systems can be the most appropriate focus of capacity support and

strengthening over the next few years (e.g. results frameworks and monitoring systems, ODA programming and budget integration, capacity development)?

Ans. The result is seen in the health sector where PBA has been done. Reform program need to be done according to the PBA process.

B4. Is your TWG willing to work with CRDB/CDC to develop a pilot country systems assessment tool? (If so, in which area, e.g. results frameworks and monitoring, ODA programming and budget integration, capacity development?)

Ans. Yes, in the area of ODA (official development assistance) and capacity development at sub-national level.

B5. What other kind of support is required from CRDB/CDC (or other RGC agency, e.g. in core reforms) to promote development effectiveness through PBAs, improved organisation and strengthening country systems?

Ans. Technical assistants for 5 key national WGs who steer the response of HIV/AIDS: prevention, care/treatment, impact mitigation, coordination and resource mobilization.

### 3. Partnership and dialogue mechanisms

Partnership and dialogue mechanisms were discussed during the April 2011 GDCC meeting. The Government paper for this meeting emphasised that "The Royal Government is committed to working together with development partners to find ways to ensure the continued effectiveness of the GDCC meeting. Indeed, all levels in our coordination mechanism are linked together and we need to strengthen them individually and also collectively."

A number of reviews have been conducted since 2006, training has been provided and a TWG Network was established in 2007 to promote dialogue, learning and relationship-building. Recognising the challenging nature of partnerships, a dedicated initiative – "Making Partnerships Effective in Cambodia" – was implemented in four stages from 2009 to 2011. This exercise found that:

Partnership-based approaches to sustainable development and to the MDGs are not new, but it is increasingly clear that genuine partnering is not a 'quick fix' or an easy option. In fact, partnering requires a significant adaptation of skills, systems and procedures for its contribution as a key delivery mechanism to be achieved. Partnerships are not 'business as usual'. They require some adjustments in practice and may even be perceived as 'challenging' to the status quo since they are based on a collaborative approach – building from the diversity of the different partners – rather than a more traditional 'command and control' scenario.

[http://www.cdc-crdp.gov.kh/cdc/twg\\_network/resource\\_mpe\\_stage4/default.htm](http://www.cdc-crdp.gov.kh/cdc/twg_network/resource_mpe_stage4/default.htm)

Following the April 2011 GDCC meeting, development partners organised their own 1-day meeting to consider how they can organise themselves for more effective partnering and dialogue with Government, civil society organizations and the private sector (summary paper available at the TWG Network meeting).

Effective partnering is central to realising the objectives of "development effectiveness" in Cambodia. Topics addressed earlier in this meeting – results-based monitoring, PBAs, country systems – are also highly dependent on effective partnership arrangements and dialogue.

#### Issues for discussion and questions for review

C1. How well has TWG performed over last year in terms of the following:

- a) Structured work around an annual plan with indicators linked to sector/thematic plan?

Ans. Seem to be well done in the health sector field (prevention among MARPs to some extent, PMTCT, care/treatment), but annual plan on prevention and impact mitigation under other sectors is not well coordinated.

- b) Strengthening coordination across Government with other relevant ministries/agencies?

Ans. Not well, non health sector not very well coordinated such as MoWA, MoEYS, MoLVT, Mol (police, public security and local administration), MoD and MoSAVY.

- c) Identifying partnering opportunities with South-South partners, private sector & civil society?

Ans.

-With south-south partners:

There's collaboration between Vietnam and Cambodia to provide intervention to Vietnamese casinos workers in Bavet. No initiation for the migrant workers with Thailand. There's regional (GMS) MoU on HIV/AIDS recently signed in GMS summit in Nay Pyi Tiew, Myanmar last year.

-With private sectors:

Social corporate responsibility need to be improved through coordination of NAA and CBCA.

-With civil society:

Good collaboration, all civil societies are encouraged to join in national AIDS response system, but their roles need to be improved.

- d) Dialogue and agreement on issues that relate to effective development (in terms of achieving sector and national development goals?)

Ans. Dialogues have been done but not fully inclusive and conclusive; no agreement has been done (because different views on the roles and mandate of NAA: as an implementing agency vs coordination institution).

- C2. Do RGC and DP members share the same views on TWG performance (if not, on what issues do they differ?)

Ans. As an outcome of this very workshop, RGC and DP members agree on the issues within the performance of the TWG and ready to open further dialogues for improving the partnership: better understanding on the TWG performance and agree on key steps identified to enable mutual accountability for an effective and efficient response.

- C3. What are the major issues to address in order to consolidate and strengthen partnerships at sector level and in the TWGs?

Ans. Communication, transparency, mutual accountability, alignment, harmonization

- C4. Is there any additional support – from CRDB/CDC or other agencies – that could support effective dialogue and coordination?

Ans.

-Orientation and technical support on PBA: training on PBA.

Done at Sihanoukville, on 27-28/02/12

Team:

H.E. Prof. Kao Try , NAA's Vice Chair, Chair of GDJ TWG on HIV/AIDS

H.E. Dr. Tia Phalla , NAA's Vice Chair

H.E. Dr. Teng Kunthy , NAA's Secretary General

Mr. Flynn Fuller , USAID's Mission Director

Mrs. Heng Sokun , CDC's deputy secretary general

Dr. Ros Seilavath , NAA's Deputy Secretary General

H.E. Dr. Sim Kim San , NAA's Department Head of Communication, Resource Mobilization

Ms. Lory , USAID