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**EL SALVADOR** 

STRENGTHENING NATIONAL CAPACITY TO FIGHT AIDS AND TUBERCULOSIS: A CASE STUDY ON UNDP'S SUPPORT TO THE IMPLEMENTATION OF GLOBAL FUND GRANTS IN EL SALVADOR

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## EXECUTIVE SUMMARY

El Salvador is an important example of a country that has gradually and successfully transitioned from having UNDP as Principal Recipient of Global Fund grants to managing funding from the Global Fund through national entities.

Over the last decade, with support from the Global Fund and other partners, El Salvador has made significant achievements in the fight against HIV and TB, including universal coverage of antiretroviral treatment, steadily expanding access to services to prevent mother-to-child transmission of HIV, reduced tuberculosis (TB) incidence and high TB treatment success rates. Though a number of challenges remain to overcome stigma, discrimination and violence targeting key populations at higher risk, rights-based approaches and effective community mobilization have been central to El Salvador's response to these diseases. Sustaining and expanding those achievements will be critical to El Salvador's efforts to achieve the Sustainable Development Goals (SDGs), in particular SDG 10 (reduced inequalities), and SDG 3, which aims to ensure healthy lives and promote well-being for all at all ages, including by promoting access to quality essential health-care services and ending the epidemics of AIDS, tuberculosis and malaria and other communicable diseases by 2030.

UNDP has been a key partner in those achievements, through implementation of Global Fund resources in El Salvador, serving for more than a decade as either interim Principal Recipient or co-Principal Recipient of Global Fund HIV and TB grants to the country. UNDP simultaneously played a key role in the establishment and scale-up of key programmes, and strengthening of the capacity of national entities to eventually manage and implement Global Fund resources.



From 2003 to 2007, UNDP acted as Principal Recipient (PR) of Global Fund HIV and TB grants in El Salvador, with sole responsibility for the management and implementation of more than US\$ 40 million in Global Fund financing, procurement of health products, and providing oversight and support to sub-recipients. Between 2007 and 2013, the government of El Salvador became co-PR and – with the support of UNDP – undertook a major capacity-building process to develop the technical expertise of local leaders, empower civil society organizations and strengthen the ability of key institutions to manage major health programmes and international funding.

As a result, in 2012 and 2013, UNDP exited as PR for all grants, transferring management of the TB grant to the Ministry of Health, and of HIV grants to the Ministry of Health and to PLAN El Salvador (as co-PRs). At the same time, at the request of the government and the Global Fund, UNDP continued to provide capacity development support to the new Principal Recipients in the areas of procurement and supply chain management, sub-recipient management, and monitoring and evaluation.

The following factors enabled the transition of the management of Global Fund resources from UNDP to national entities in El Salvador:

• An effective relationship of trust between national UNDP and stakeholders, including government and civil society, based

on the country's long history of engagement with the UN. This relationship enabled UNDP to act as an effective neutral party among all stakeholders in El Salvador's response to HIV and TB.

• A strong, well-staffed and well-respected UNDP Country Office that offered the right mix of skills and approaches to the country at the right time. These skills included expertise in financial management, administration and procurement and technical aspects of HIV and TB programming, as well as human rights, law reform, anti-discrimination and experience working with key populations. UNDP's approaches specifically aimed to address social exclusion and ensure multisectoral action, both of which have strongly contributed to the expansion of HIV and TB programming in El Salvador.

• UNDP's focus on fostering a shared national vision for the responses to TB and HIV through strong support for El Salvador's Global Fund Country Coordinating Mechanism and inclusive national strategic planning processes.

• Clear expectations among all stakeholders that, from the beginning, UNDP's role as co-Principal Recipient was intended to be an interim step towards the eventual transition of responsibilities to national entities. This understanding enabled UNDP to act as a 'companion' to the country as its capacities evolved.

• An effective division of labor between the government and UNDP when acting as co-Principal Recipients, enabling the government to focus on the expansion of treatment and care, while UNDP leveraged its specific expertise in procurement, prevention, human rights and key populations.

• Significant investments in people and leaders committed to health, human rights and sexual diversity.

• A staged process of capacity building focusing initially on supporting the country to become familiar with Global Fund processes and requirements; secondly, on sustained development of capacities in government and civil society to implement programmes, and finally, on addressing outstanding capacity gaps and preparing for transition.

• Attention to the long-term sustainability of the national HIV and TB responses.

From January 2015, for the first time, El Salvador was independently managing and implementing Global Fund resources allocated to the country. Its experience shows that, with sustained investments in infrastructure, processes and people, a country emerging from prolonged conflict can successfully rebuild national institutions, foster multisectoral collaboration, and implement innovative approaches to health, while also advancing human rights.

Blood samples are collected as Salvadorans take part in a national testing for AIDS day in San Salvador. © Luis Galdamez/Reuters





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## OVERVIEW: ABOUT EL SALVADOR

El Salvador, the smallest and most densely populated country in Central America, is a lower middle-income country with a population of approximately 6.8 million people (2013). The population is young and highly urbanized, with nearly a third of the population under the age of 15 years, around 30 percent of Salvadorans living in or around the capital, San Salvador. Per capita GDP in 2013 was around US\$ 7,500. El Salvador is continuing a process of social and economic reconstruction and democratization after a 12-year civil war that concluded in 1992. The country faces significant social and economic inequalities and high levels of crime and violence.

#### MAJOR HEALTH CHALLENGES

The five leading causes of death in El Salvador in 2008 were firearm injuries, heart attacks, pneumonia, road accidents and chronic renal failure. Half of all reported deaths in 2008 were from chronic, non-communicable diseases. Life expectancy of 74 years is consistent with the regional average, while the rate of under-five mortality stood at 16 deaths per 1000 live births (2012), compared to the average of 56 across lower middle-income countries. Dengue fever is endemic in El Salvador, and in 2014 the country experienced a significant outbreak of Chikungunya that was declared a national emergency. However, good progress has been made in the control of vaccine-preventable diseases. El Salvador has reduced its malaria burden by 99 percent since 1990 and, while malaria remains a health risk, the number of reported cases is low (24 in 2010) and the country is well positioned to eliminate the disease in the coming years.



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