

GLOBAL CRISIS...GLOBAL ACTION

HIV/AIDS—A GOVERNANCE CHALLENGE

[BY] slowly killing people in their most productive years, HIV/AIDS is particularly devastating in terms of creating and deepening poverty, reversing achievements in education, lowering labour productivity, threatening food security, and putting a break on economic progress. These conditions of deepening human poverty in turn fuel the spread of the epidemic and pose a formidable obstacle to HIV/AIDS prevention and treatment.

TOTAL MOBILIZATION

The response to HIV/AIDS must focus squarely on three basic objectives: (i) reducing the number of new infections and reversing the spread of the epidemic, (ii) progressively expanding access to care and treatment for people living with HIV and AIDS, and (iii) mitigating the impact of the epidemic on social and economic development by intensifying national poverty reduction efforts and providing support for those particularly affected.

This is not business as usual. HIV/AIDS is a **governance challenge** of great complexity. In other words, success in tackling the epidemic will depend on how well the overall national response is governed, managed and coordinated, through strong leadership at all levels, dynamic interaction between government and civil society, and society-wide mobilization behind the common goal of containing this epidemic.

Successful governance of the HIV/AIDS response, learning from experiences over the last 20 years, share a number of common features. There is no one ideal blueprint for success, but some basic principles of effectiveness have been identified.

ELEMENTS OF EFFECTIVE GOVERNANCE

Effective governance of national responses have generally had the following features:

1. Political will, vision and leadership: The effective governance of a scaled-up response to HIV/AIDS requires clear vision and leadership at the highest level of government. This leadership must manifest itself as recognition that practical steps be taken to allocate national resources towards HIV/AIDS priorities and mobilize institutions and actors well beyond the health sector. The response in countries like **Thailand** and **Uganda** benefited greatly from visionary leadership at an early stage, creating the enabling environment for total mobilization of communities, governments and civil society groups.

2. A large-scale strategic response: Key to success is the formulation of powerful national AIDS plans that are truly multi-sectoral, results-oriented, target-based, fundable and coordinated at the highest level of government. The effective governance of the response to HIV/AIDS is contingent on large-scale multi-sectoral planning, providing the necessary framework for a coordinated response of diverse range of partners. These strategic plans need to be comprehensive in coverage and include prevention, care and treatment, and also impact mitigation priorities—as is the case in a growing number of countries. National strategies need to focus on achieving real results, establishing a framework for accountability, ensuring sustained action, and maintaining strong ownership by governments and communities. Without such an approach, action will remain sporadic and patchy rather than comprehensive and large-scale.

3. Total mobilization of governments and civil society: Successful governance of the HIV/AIDS response involves multi-sectoral and multi-level collaboration between a wide range of government departments and between governments and civil society groups and the private sector. **Senegal** has been successful in containing the epidemic precisely because of flourishing of partnerships between women groups, faith-based organizations, district

authorities, government agencies and private sector entities. Within governments, all sectors have a key role to play. Ministries of Labour, for example, can promote workplace prevention and care programmes in the private sector. Ministries of Defence can use their budgets to implement programmes for the military. Ministries of Education can introduce AIDS education for school children and their parents. Ministries of Agriculture can use its network of extension workers for helping communities cope with the impact of the epidemic. Ministries of Health must face the challenge of providing treatment for people living with HIV/AIDS and keep the blood supply safe.

4. Decentralized and scaled-up response:

Effective governance of the HIV/AIDS response depends on the ability of governments to bring the response to the local level. District and municipal authorities must be empowered and be given the resources to scale up their response and work hand-in-hand with communities that are at the front lines of prevention and care. **Botswana, Ghana and Laos** are examples where special efforts are made to strengthen provincial and district level strategic planning and implementation capacity for HIV/AIDS prevention, care and support.

5. Stronger capacity for planning and implementation: The governance challenge of HIV/AIDS also involves the development of national capacities for effective management and implementation. Sharp increases in global funding for HIV/AIDS will have great implications for the absorptive capacity of governments and communities. Special efforts are needed to establish strong accountability frameworks, budgeting systems, managerial capacities and monitoring and evaluation systems that will facilitate the rapid disbursement of funds and effective implementation at scale.

6. Adequate domestic resources: Another lesson learnt from 20 years of experience in responding to the epidemic is that HIV/AIDS must be at the top of the national development agendas. In order to ensure adequate allocation of resources from national budgets toward HIV/AIDS prevention and care, national development plans and poverty reduction strategies must take full account of the challenge of both slowing the spread of the epidemic and coping with its impact. HIV/AIDS

priorities must be properly debated in national parliaments, and be fully supported by decisions made in cabinet meetings and by the Ministry of Finance. This is particularly important when countries are deciding on how debt relief savings will be allocated, a key opportunity to increase resources available for HIV prevention and care. **Burkina Faso and Cameroon** are just two examples where HIV/AIDS priorities figure prominently in these key decision making fora.

GLOBAL SUPPORT FOR NATIONAL STRATEGIES

HIV/AIDS is a unique challenge that requires much more than a narrow public health response. Successful prevention and impact mitigation hinges on the full mobilization of all sectors and levels of government and civil society. Global funding should support large-scale national strategic plans—covering the wide gamut of interventions needed to contain the epidemic—as opposed to fragmented projects. Success then depends on how well countries manage to govern their own response and on the supportiveness of donors, the United Nations, multilateral lending institutions and international civil society organizations. ■

United Nations Development Programme
Bureau for Development Policy (BDP)
Special Initiative on HIV/AIDS
One United Nations Plaza
New York, New York 10017, USA
+1 212 906 3688
www.undp.org/hiv/index.html