

A synthesis of institutional arrangements of twelve National AIDS Councils in Sub-Saharan Africa

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Image: National AIDS Council Zambia



STARZ in context

The **Strengthening the AIDS Response Zambia (STARZ)** programme provided technical support to NAC Zambia from May 2004 until August 2009. This has included support for improved participation of civil society and the private sector in the national multisectoral response to HIV and AIDS. The STARZ programme was funded by the UK's Department for International Development (DFID), with technical assistance supplied by HLSP in partnership with JHU-CCP, HDA and PMTC(Z) Ltd.

Introduction

In 2008 the National AIDS Council (NAC) in Zambia was under pressure to review its institutional position under the Ministry of Health. The NAC commissioned an assessment of institutional arrangements of up to twelve NACs in the region. The review was conducted by HLSP, under the auspices of the STARZ programme.

The resultant paper was based on a process of literature review and informant interviews with agency-based and NAC staff and independent consultants familiar with NAC issues. The countries reviewed include: Botswana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Nigeria, Rwanda, Tanzania, Uganda, Zambia and Zimbabwe.

Common features and emerging themes were identified through analysis of country-specific data. The paper concluded that the effectiveness of NACs is significantly influenced by the personalities of those in senior management positions, and that many NACs are adapting their functions to better suit their local circumstances. The following is a synthesis of the review.

Institutional set up

Common features

A number of common institutional features emerged during the process of the review:

- **NACs are young institutions.** Most have been established since 2000.
- **There is a predominant NAC model in place.** The institutional set up of a NAC comprises a governance body or board or council and an operational secretariat.

- **Positioning in wider public administration system.** Most of the NACs reviewed are positioned under the highest political office in the country.
- **Similar legal frameworks.** All the NACs reviewed have been, or are in the process of being, set up by an Act of Parliament or Presidential Decree.
- **Decentralised structures at provincial and district level.** Most NACs have some form of decentralised HIV and AIDS coordinating structures to provincial and district levels or below, but the function and representation differ according to context.

Despite some commonalities in institutional set up, there is a diversity of approaches being taken up by NACs to adapt their structure and function to better suit the realities of their country context.

Emerging themes

A number of key issues regarding the institutional set-up emerged during the course of this review:

Position of NAC under the Office of the President (OoP).

No studies have systematically reviewed the impact or influence of being positioned under the OoP on the effectiveness of the NAC or the national response. However, evidence from this review suggests that the power, authority and credibility of NACs appear not to be based just on their position in the wider system, but are partly dependent on the personalities and relationships between key individuals. These relationships can be politically based and dependent on the prevailing political context. Critical success factors include: personal commitment and dynamism of senior members of the Secretariat to drive NAC's agenda forward; the political connections of the Chair of the Board and, therefore, ability to "get things done"; and, the personal relationship between senior members of the Secretariat and the President or Permanent Secretariat (PS) in charge.

Legal framework and the institutional set up.

NACs derive their authority from their legal framework. Clear institutional arrangements and legal status have emerged as important for NACs to effectively deliver their mandates, including coordination and resource mobilisation. Where institutional arrangements have been confused, or legal status is outdated or absent, effective coordination is compromised and the role of the NAC is undermined.

The Act of Parliament which sets up the NAC and provides it with the legitimacy and mandate to operate can also impose a rigidity that makes it difficult to change the institutional set up. Any major change to the mandate of a NAC involves going back to Parliament and revising or renewing the Act – a cumbersome and lengthy process. Potentially this could have implications for the future when NACs might need to be more flexible with their set up, their mandate and their organisational structures.

Capacity to plan, manage and coordinate HIV and AIDS activities at decentralised levels.

Capacity constraints have challenged coordination of AIDS activities at sub-national levels. Challenges include: difficulties accessing and spending money for AIDS activities at district levels; lack of clarity on role and decision making structures; limited capacity at all levels to plan, manage and coordinate AIDS activities.

Governance, structure and functions of National AIDS Councils

Common features

The function and structure of the NAC varies according to context but there are some commonalities and specific observations:

- **Board size and composition:** Typically, a Board of Commissioners is quite large with between 15 and 30 members. Commissioners are either elected by their constituencies or, more usually, appointed by government for a fixed term, renewable on the basis of performance. Most Boards are highly representational and include Commissioners drawn from government, faith based organisations, civil society including people living with HIV (PLHIV) and donors.
- **Frequency of Board meetings:** Boards of Commissioners tend to meet irregularly, quarterly meetings being the exception, not the norm.
- **Use of advisory coordination mechanisms to inform the Board:** Partnership Forums or Committees have been widely established and provide broader stakeholder oversight of the NAC and play an advisory role to the Board, particularly on policy issues.
- **Civil society representation:** All the NACs reviewed included civil society representation on Boards and, where they exist, on Partnership Forums/Committees. Civil society is also consistently represented in newer and strengthened coordination structures. However, beyond these structures, the review found it challenging to source information about how NACs are seeking to strengthen civil society representation.
- **Function of NACs:** There is a lack of published documentation that distinguishes the specific functions of the Board vis à vis the Secretariat, but there is an agreed set of core functions, which include:
 - spearheading strategic initiatives such as policy development and strategic planning in sectors;
 - guiding the implementation of the National HIV and AIDS Action Framework;
 - resource mobilisation;
 - advocating and mobilising HIV and AIDS mainstreaming in all sectors at all levels;
 - building partnerships among all stakeholders in the country with regional and international linkages;
 - developing knowledge management approaches to document best practices;
 - dissemination and promotion of the best practices;
 - mapping interventions to indicate coverage and scope geographically;
 - facilitation and support for capacity building; managing overall monitoring and evaluation of HIV and AIDS activities;
 - and, identifying HIV and AIDS research priorities.

In reality many of these functions are undertaken by the Secretariat rather than the Board. Notably absent in any NAC documentation on functions is any reference to stated role, interactions and lines of accountability between NACs and Parliamentary Committees on HIV and AIDS. Country level documentation on formalised relationships between NACs and MOHs is also scarce.

- **Grant Management Functions:** Most of the NACs reviewed are performing grant management functions, often with the help of contracted Fund Management Agencies. Although outside the “core” functions, NACs have been effective in putting in place structures and staff which handle grant disbursements.
- **Salary independence:** Although details are scarce, about half of the NACs reviewed were operating a salary structure independent of the civil service enabling greater flexibility in the terms and conditions of recruitment and in incentives to attract the right staff. Despite the departure from civil service pay scales, capacity within the NAC at central level was consistently cited by informants as a constraint.

Emerging themes

Key issues regarding the governance, structure and functions of NACs include:

Functionality of Boards of Commissioners.

Boards of Commissioners were initially set up for two reasons: to provide a broad based partnership forum of stakeholders involved in the national response and as an important mechanism for promoting multisectoral cooperation; and to ensure good corporate governance practice, similar to that of a private sector board which ensures that an organisation operates within its legal mandate and works efficiently towards meeting its objectives.

From this review it is clear that boards are facing challenges in meeting these objectives primarily because performing the dual role of representation and good governance requires different skill sets and different types of representation. The review found that success and effective board functioning is mainly dependent on personalities rather than any characteristics in their configuration.

Delivering mandated core functions.

There is evidence that some NACs are still experiencing problems with delivering their core mandate to lead and coordinate a multisectoral response, especially mainstreaming HIV and AIDS in other sectors. Many ministries and local government bodies remain unclear about their role in, and potential for, contributing to the national response. At sub-national levels, AIDS committees often lack capacity and remain focused on specific health-related AIDS activities insufficiently involving the non state sector. Local government authorities may have the mandate but have problems accessing resources to take up their coordination role with sectors and other players.

Delivery of core or non core functions.

For some NACs, core business has always included a grant management function, a function that NACs perform well and that takes place alongside coordination and mainstreaming functions. The involvement in the management of grants has sometimes been cited by donors as a distraction from delivering the core business of coordination and mainstreaming. However donor behaviour can be contradictory – providing NAC with funds to support mechanisms that channel grants to civil society, while calling for greater focus on the core functions of coordination.

Financing the national response

Common features

The financing of the national HIV and AIDS response is country-specific, but there are some commonalities:

- **Links between AIDS and national budgeting processes:** As relatively new organisations NACs are still working to define their role, and to integrate AIDS in national planning and budgeting processes.
- **Significant increases in financing:** All the countries reviewed have experienced a significant increase in external financing of the national response over the last few years.
- **Common major donors:** PEPFAR, the Global Fund (GF), and World Bank (WB) MAP programmes.
- **Diverse financing mechanisms:** The countries reviewed all exhibit a multiple range of external financing mechanisms, including disease target specific programming (GF), discrete projects, co-financing, pooled or basket funding and direct budget support (DBS). These mechanisms are becoming increasingly diverse with new funding instruments under development in a number of countries.

- **NAC involvement in resource allocation:** The extent to which NACs have authority to allocate resources over and above their own budget was not clear from this assessment. However, some NACs are mandated to undertake resource disbursement and those with a grant management function are allocating resources as part of this role e.g. Malawi, Kenya, Tanzania, Nigeria

Emerging themes

Initiatives and mechanisms to support alignment of development partner funding to NASF priorities.

There is increasing cooperation between NACs and donors to strengthen alignment of external funding with National AIDS Strategic Framework (NASF) priorities through a range of different mechanisms and instruments. These activities were viewed positively by NAC respondents, being seen as clearly contributing to the fulfilment of their core mandates.

Planning and sustainability of external financing.

Financial sustainability is a significant issue especially in the context of universal access targets and increased pressures associated with scale up. Donor planning and funding cycles often do not correspond to strategic planning and budgeting cycles at country level and two of the most significant donors, PEPFAR and the GF, continue to programme their funds outside government budgetary frameworks. They present challenges to NACs working to coordinate resource allocation against the NASF, especially in an environment where substantial external resources are being used to purchase ARVs.

Harmonisation and alignment

Common features

The harmonisation and alignment of the national HIV and AIDS response is country-specific, but there are some commonalities.

- **Alignment of national development instruments with national AIDS strategies and plans:** Most countries have links between the NASF and wider national development plans. Integration of HIV and AIDS tends to be stronger in more recently developed PRSPs/NDPs.
- **Formal linkages between NAC and actors in Ministries of Finance/Economics/Planning (MOFP):** Details are scarce on relationships between the NAC and actors involved in national level planning and budgeting, but from the NACs reviewed, all appear to be working hard to better align with national processes and some NACs are actively seeking to develop these relationships.
- **Alignment of MOH and multisectoral HIV and AIDS policy and strategy:** There is evidence of alignment between MOH and HIV policies and strategies and all countries, often with development partner support, are seeking to strengthen convergence between priorities in the NASF and health sector strategic plans.
- **NAC-led development partner coordination mechanisms:** All countries reviewed have established development partner coordination mechanisms.
- **Commitment to harmonisation and alignment with development partners:** There is increasing cooperation between NACs and development partners with a growth in mechanisms to further align external funding to NAC/NASF priorities.

Emerging themes

Substantial players outside the harmonisation and alignment agenda. Substantial players remaining outside the harmonisation and alignment agenda challenge NACs' coordination mandate. Some countries identified donor behaviour as a key obstacle to alignment with country needs and systems.

Rationalisation of coordination structures and mechanisms.

Some countries have made efforts to rationalise and streamline systems and processes by removing parallel mechanisms. For example in Mozambique they have combined the roles and functions of the country coordinating mechanism (CCM) with the National AIDS coordinating body. Similarly, several countries have established joint financing mechanisms to further rationalise coordination.

Concluding remarks

One of the most important findings from the review is that the power, authority and credibility of NACs appears not to be based on their location in the wider system, but is partly dependent on the personalities and relationships between key individuals in the NAC and wider areas of government and other sectors. Another key finding from the review is that the success of NACs depends on constant adaptation of the model to better suit local circumstances.

NACs need to learn from each other and to ensure that the experiences of adaptation and reforming action is documented and disseminated to peers and to the international community.

