

Political Commitment, Governance and AIDS A Discussion Paper

(Revised)



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Introduction

In July 1992, the Organization of African Unity adopted the 'Declaration on the AIDS Epidemic in Africa' in which the assembled heads of states gave their 'fullest political commitment to mobilising society as a whole for the fight against AIDS.' These leaders declared that by the end of 1992, each one of them 'would be publicly recognized as the leader of the fight against AIDS' in their respective countries. At that meeting, Africa's leaders endorsed a six point AIDS action agenda that could have averted much of the present infection and impact in the region.

In December 1994, forty-two governments met in Paris to renew their commitment to the struggle against AIDS. Speeches and pledges were made, and the 'Paris AIDS Summit Declaration' was signed. In September 1999 the prime ministers, vice-presidents and ministers of health of ten African countries met in Lusaka and signed another 'Declaration on the HIV/AIDS Epidemic', which also promises action on AIDS.

Governments have a unique and crucial role in the national response to the AIDS pandemic. In most industrialised countries and a few developing countries, notably Brazil, Senegal, Thailand and Uganda, governments have taken concrete action to address HIV and AIDS. In many other countries, something is clearly missing.

Government failure, particularly in those countries worst-affected, has generated calls for greater 'political commitment', yet we do not have a common or clear understanding of what this elusive factor is or how it might be increased. This paper explores the difficulties of focusing on political commitment and questions the usefulness of this concept for programming and advocacy. It concludes that a focus on better governance would be more useful than simple exhortations for greater political commitment.

ICAD commissioned this paper in order to stimulate discussion about political commitment in response to the AIDS pandemic. This paper was written for individuals and organisations working in the field of HIV/AIDS and development, including researchers, policy makers, programme managers and activists. ICAD welcomes your responses - please contact the ICAD Executive Director (info@icad-cisd.com).

Political Commitment - a confusing euphemism?

In one view, it is the role of government leaders to motivate the private sector and civil society to take action on AIDS.

“Perhaps most important in the global battle against HIV/AIDS is political commitment. Leaders at the national, provincial, and local levels of government must speak out about HIV/AIDS and encourage businesses and non-governmental organizations to commit to work against the disease.” David Satcher, MD, Surgeon General of the United States of America and Assistant Secretary, Department of Health and Human Services

In another view, the initiative comes from the ground up – it is communities which must advocate for national action by politicians and bureaucrats.

“Communities should share their experiences with other communities, knowing that success is possible and that the threat of HIV/AIDS can be controlled. Front-line workers should share their experiences with their peers, who face similar problems under different conditions. The local response support teams should encourage these exchanges, structuring the process so that political decision makers also have access to the documented experiences. This should lead to greater political commitment and a more vigorous and coherent national response.” (UNAIDS, undated)

These two points of view reflect broader tensions between a 'professional' or 'bureaucratic' approach to AIDS, and an approach which views community action as the impetus for the governmental response. In countries with recorded successes against AIDS there is often a continuing dialogue between government and community. In other countries, leaders at all levels of government appear deaf to calls for action, and sometimes actively oppose policies that have been shown to work.

Calls for greater political commitment direct responsibility for action on AIDS to government leaders, but without benchmarks for progress the response may be as insubstantial as the concept itself. The following additional difficulties arise with the concept of political commitment.

Sustained political commitment is uncommon, and fragile

In the developing world, three examples are commonly given: Thailand, Uganda and Senegal. In each country, strong political commitment is cited as a factor in its response. In 1986, Uganda's President Yoweri Museveni publicly acknowledged the country's AIDS problem and established the Uganda AIDS Commission within the Office of the President. In Senegal, where HIV prevalence has remained relatively low, the government responded early by permitting and promoting extensive NGO activity, by including HIV in sex education for school-aged children, and by integrating STD care into regular primary health services. In Thailand, following a rapid rise in HIV infection in the late 1980s, concerted lobbying led to the 1991 nation-wide prevention programme which included the following key elements:

- each key ministry had its own AIDS plan and budget;
- all provincial governors led the AIDS programme in their respective provinces through the provincial development planning system;
- the business community, people living with HIV/AIDS, religious leaders and other community leaders became very involved in contributing to policy dialogue and resource mobilisation (Sittitrai, 2000).

More recently, as a result of decisive government action, Brazil now leads the developing world in the provision of antiretroviral therapy, with a government policy of universal access supported by local manufacture or bulk importation of key drugs. This has resulted in reduced morbidity due to AIDS, and most likely reduced the spread of HIV as well.

To remain effective in the longer term, political commitment must be consistent. Even those countries with early successes could face rapid reversals if commitment wavers. For example in Uganda, despite early support for AIDS NGOs, the government has refused to 'register' the national coalition of NGOs (Human Rights Watch, 2000). Yet a vibrant civil society is essential to the national response. In Australia, the government funded the creation of a national network of AIDS groups, and community representatives often sit alongside bureaucrats on government policy bodies (Altman, 1994).

Political commitment for development assistance for both prevention (including vaccine research) and care cannot be taken for granted. Political commitment, and hence funding, may quickly evaporate if the world economy becomes less buoyant, or if the domestic political climate becomes more hostile to foreign aid.

A lack of political commitment is a common theme in related policy areas - but few solutions are evident

The focus on political commitment can also be found in related development areas such as poverty and reproductive health. In 1991 the UN Development Programme's *Human Development Report* concluded that the lack of political commitment, not of financial resources, is often the 'real cause' of human neglect (UNDP, 1991). Echoing the Human Development Report, an independent expert on human rights and extreme poverty appointed by the Commission on Human Rights noted in 2000 that the lack of political commitment, rather than a lack of financial resources, was the 'real obstacle' to poverty eradication (Lizin, 2000).

At the 1994 International Conference on Population and Development the governments of the world committed themselves to a comprehensive Programme of Action. Yet by 1999, in another failure of political will, only one third of the funds pledged by donors had been provided (Klitsch, 1999). In short, political commitment has also been identified as crucial in achieving progress in other development areas, but few ways have been identified to directly achieve it.

The determinants of political commitment are complex and difficult to identify

An initially attractive model is that of the 'AIDS champion' - a government leader whose charisma and determination pushes necessary policies through a stolid or hostile bureaucracy. President Museveni is sometimes characterised as a leader of this type. In another demonstration of commitment, the then head of state of Zambia, President Kenneth Kaunda, opened international conferences on AIDS in Montreal (1989) and Florence (1991). He had lost a son to the epidemic.

The dangers of reliance on this model are obvious: such champions are rare, the momentum will quickly fade if they find another priority or leave office, or they may champion ineffective or dangerous policies. President Museveni was reluctant to permit widespread condom distribution in the early days of the epidemic in Uganda.

Even if the initial push comes from above, research has shown that policies are adopted more quickly when a broad consultative process is undertaken. In Ethiopia, it took over a decade to get a national AIDS policy in place. The process entailed repeated internal government review involving relatively few people and almost no community involvement. In South Africa, when civil society was able to flourish following the transition to democracy, a national policy was debated and adopted in the space of two years (Stover & Johnston, 1999). It is worth remembering that the frank and heated discussion in the South African media over that government's AIDS policies could probably not have occurred in any other country in the region.

Political commitment is more likely if government leaders must face the consequences of non-action. In a full democracy this could mean losing office, but this is less likely in many of the partial democracies in the developing world. Early research by Jonathan Mann and colleagues on the determinants of political will showed that many countries whose heads of state had remained silent on HIV/AIDS ranked lower on the UNDP's Human Freedom Index (Mann et al, 1992). The less the respect for civil and political rights, the less likely government leaders will speak out on HIV/AIDS. Nor can communities easily challenge ineffective or dangerous policies in such circumstances.

A free and active media sector is essential. The distinguished economist Amarty Sen observed long ago that famines did not exist in countries where a free press was allowed to operate. According to Sen, it is not the lack of food in the aggregate that gives rise to famines, but the lack of access to food by the poor in famine regions. A free press exposes these problems; once exposed, the failure to act is absolutely intolerable (Stiglitz, 1999). There are evident parallels with AIDS.

More recently, former World Bank Vice President and Chief Economist Joseph Stiglitz identified the key ingredients in a successful development strategy as *ownership* and *participation* (Stiglitz, 1998). World Bank Institute research into governance (defined broadly as 'the traditions and institutions by which authority in a country is exercised') shows that there is a strong causal relationship between better governance and better development outcomes. Indicators used to measure good governance include political process, civil and political rights, media independence, civil service independence and competence, rule of law, and corruption (Kaufmann et al, 1999).

In 1999 Kenya rated poorly on the World Bank Institute governance indicators. In mid-2000, because the Ministry of Health could not account for missing funds, UNICEF suspended its government AIDS funding and instead provided funds directly to NGOs and community based organizations (Etieyibo, 2000). It is reasonable to conclude that better governance will also lead to more effective AIDS programmes.

Finally, in some of the worst affected parts of the world there is no realistic expectation of adequate government capacity, at least within the time frame needed for an effective response to the epidemic. In cases where NGOs and international agencies provide the only effective services, an undue emphasis on governments in the short term could be counter-productive (Altman, 1999).

Political commitment is difficult to measure

In order to know whether efforts to generate political commitment are successful, it would be useful to have tools for measuring it. The following indicators have been proposed to assess the degree of political commitment to addressing AIDS:

- Budget allocations to prevention and care

In 1998 UNAIDS released a study of sixty-four countries which analysed the level of national and international contributions to national AIDS programmes. The study established baseline contributions for the national response for 1996 (UNAIDS, 1998). To be useful, further work should be done to determine funding patterns over time.

A protocol for the measurement of spending from national accounts has been developed by SIDALAC in Latin America (UNAIDS, 2000). One problem identified with this protocol, however, is that low national spending may not be a fair indication of a government's commitment to fighting AIDS. If international contributions are already significant, a government may choose to devote national resources to other priorities for which less development assistance is available. Further, if a true multi-sectoral approach is adopted, funding to national AIDS programmes alone will not adequately reflect the government response.

- Measures of AIDS programme activity.

The AIDS Program Effort Index, developed by the Policy Project, is a composite index designed to measure political commitment and programme effort. The index is based on a questionnaire completed by key informants from diverse backgrounds, and includes components measuring 'political support' and 'organisational structure' (including a multi-sectoral approach) (Stover et al, 2000). Because the Index is subjective, it may be more useful in assessing a particular government's response over time than in comparing different national responses.

- Indicators of compliance with the International Guidelines on HIV/AIDS and Human Rights.

The Guidelines provide a basis for a broad policy and legal response. A protocol developed at the Australian National University measures legislative recognition of the international norms set out in the Guidelines (Watchirs, 2000). Although law reform is perhaps easier to assess than spending, it is clear that without education, and accessible and effective enforcement, law reform alone may have little impact. More work is needed on this aspect of the national response, including the establishment of goals and deadlines.

Because there are no easy ways to measure political commitment, it is difficult to know whether efforts to increase political commitment have any impact on the AIDS epidemic. A focus on improved governance provides concrete and measurable programming options to increase government effectiveness in the response to AIDS, and which may also increase visible government commitment as well.

How can we improve governance, and hence the government response to AIDS?

The following practical measures are offered for consideration. ICAD welcomes your views on other ways to improve government effectiveness in the response to AIDS.

- **Strengthen civil and political rights to permit and encourage community discussion and advocacy.** In countries where freedom of speech and association are restricted, leaders are less likely to tackle difficult issues such as AIDS. Without open debate, government policies are more likely to be ineffective or dangerous. International and regional inter-governmental organisations can have a strong impact here, as can be seen as Eastern European countries amend their laws and practices in preparation to join the European Union.
- **Build skills of affected communities and support links with more experienced advocates.** Projects to enhance community advocacy skills, and to partner AIDS groups with legal and advocacy organisations, can achieve marked success. The Fact Sheet 'HIV/AIDS, Human Rights and Development' gives examples of rights-based programming in different countries and contexts (ICAD, 2000).
- **Include AIDS advocacy groups in technical and financial support for improved democracy, governance and participation.** Donors often support the development of civil society organisations in the context of democracy building. Organisations supported could include AIDS advocacy or patients rights groups which can lobby government for effective prevention and care services. In Kenya, AIDSCAP (USAID) assisted the Kenya AIDS NGOs Consortium (KANCO) to hold a series of district and provincial workshops in 1996 and 1997 to solicit the views and experiences of NGO personnel, religious leaders, civil servants and policymakers. Designed to build consensus among diverse groups, these workshops gave those working in HIV/AIDS prevention and care opportunities to identify common concerns and problems and to develop advocacy strategies for advancing priority issues (AIDSCAP, undated).

- **Include all levels of government in advocacy efforts.** Experience in South Africa has demonstrated that national, provincial and local levels of government must be targeted. Advocacy efforts at all levels must be matched with constant monitoring to ensure government promises for action on AIDS do not evaporate (Hatane and Kariem, 2000). Donors should appreciate that this is a costly and time-consuming, but essential, role for civil society.
- **Encourage transparency and accountability.** Data on the national response should be accessible, which requires good monitoring and evaluation, as well as a data dissemination plan (UNAIDS, 2000). Establish inter-sectoral structures with community representation. Require concrete outcomes to facilitate monitoring and evaluation. Train and fund local groups to monitor progress.
- **Prioritise financial and technical support to countries which demonstrate commitment.** The UNAIDS Board has endorsed an approach to the allocation of certain resources which in part reflects the likelihood of a strengthened national response. Questions to assess competing requests for assistance will include: 'Is there political commitment to deal with the epidemic? Is it openly expressed? Is it reflected in adequate staffing of a national programme or otherwise?' (UNAIDS, 1999). In circumstances in which government commitment is lacking other options, such as supporting community advocacy as noted above, should also be explored.
- **Include support for the office of ombudsman and national human rights institutions.** Such offices must be independent, and immunity guaranteed for those who dare to bring complaints (Jenkins, 2000). Office staff must also be trained to be sensitive to HIV/AIDS-related issues.

Political pressure from governments, and particularly larger donors, should also continue. In March 1999, the U.S. Department of State launched a diplomatic initiative to raise the profile of the global HIV/AIDS epidemic and foster political commitment overseas. The initiative instructs ambassadors and high-level U.S. officials to encourage foreign leaders to increase attention and resources in combating HIV/AIDS. The State Department also works with international organizations, other governments, and the public and private sectors to draw greater attention and resources to the HIV/AIDS epidemic (Department of State, 1999). Such advocacy efforts should continue alongside concrete action to improve governance, and hence governments' responses to AIDS.

Conclusion

Although there appears widespread agreement that political commitment is an important factor in the successful response to the AIDS epidemic, it remains an elusive concept. It is unclear whether a focus on greater political commitment alone will have a significant impact on the course of the pandemic. Worse, it ignores the complex reasons why government leaders act, or fail to act, on AIDS.

On the other hand, research has shown a strong causal relationship between better governance and better development outcomes. It is reasonable to conclude that better governance will also lead to more effective AIDS programmes.

A policy focus on improved governance offers a range of practical options for programming, based on experience in different areas of development. It is recommended therefore that calls for greater political commitment be accompanied by concrete support for better governance, which is more likely to have a greater impact on the course of the AIDS pandemic.

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