
Preliminary Report of Research Findings and Recommendations

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Ouagadougou, Burkina Faso

November 2008

I. INTRODUCTION

TrustAfrica commissioned this research through the Technical Support Facility for West and Central Africa as part of an initiative to increase the frequency and quality of African engagement with international institutions, initiatives, and funders that shape global responses to the HIV/AIDS pandemic in Africa. This study seeks to document gaps in Africa’s response to HIV/AIDS and identify specific strategies to fill them.

The research was conducted by a team of three investigators with expertise in HIV/AIDS and organizational development from mid-February through the end of March 2008. It involved fieldwork in four countries in three subregions: Gambia and Ghana (Anglophone West Africa), Kenya (East Africa), and Niger (Francophone West Africa). The team conducted qualitative research to elicit the knowledge, views, and perspectives of selected key informants working in the public sector, academia, and the media as well as at civil society organizations and international development organizations.

For background and context, the team conducted a literature review examining various dimensions of the pandemic in Africa, including its evolution and impact as well as government responses, policies, and programs. This desk work focused on the four countries visited as well as Botswana, Malawi, South Africa, Uganda, Zambia, and the West Africa subregion.

The research conducted through this fieldwork and document review not only informs this comprehensive report, but will also help to develop a database that TrustAfrica can share with partner organizations and update regularly.

II. FINDINGS AND DISCUSSION

From the document review and interviews with key informants, the team can summarize the current situation as follows:
General: There is a great deal of interest in the research topic, and many participants in the research saw it as relevant and important to Africa’s aspirations in all development sectors, not just the response to HIV/AIDS. However, the research generated many more questions than answers, for example on issues such as definition of “African perspective” and whether Africa can really influence the international community. Also, the question arose as to who are “leaders” and what knowledge leaders need in order to engage effectively? Respondents also drew attention to the need to consider engagement not only with the international community, but also within Africa at the local, national, subregional, and continental levels.

African perspectives: African perspectives in terms of desires, preferences, and goals and objectives are diverse and many, some known and others not so. They manifest themselves in specific expectations (from the international community) such as space for the exercise of control and flexibility in making policy and programming decisions, setting local research agendas, and allocating resources.

Leaders: Most of the time, African leaders seek to influence the HIV/AIDS global agenda to reflect African perspectives through national, subregional, and Africa-wide meetings in addition to the global settings. However, their knowledge and attitudes vary, with some outwardly supporting policies and programs and others in denial, hesitant, or lacking commitment and political will. Stephen Lewis, the UN Special Ambassador for AIDS, reported that when he urged Daniel arap Moi, Kenya’s former president, to speak out about AIDS in Kenya, Moi replied, “We don’t talk about nasty things.” On the other hand, President Yoweri Museveni’s determination to speak openly about the disease in Uganda, and about the changes in sexual practices necessary to prevent it, is credited with breaking through the stigma and silence surrounding the disease. Leaders’ attitudes and practices continue to affect the allocation and use of resources.

Engagement: Africa has engaged the international community in various ways and with varying degrees of success. Overall, the engagement does not appear effective in fully ensuring that “African perspectives” are taken into account. There has been no purposeful engagement strategy, and consequently there is no purposeful effort to nurture an engagement process or documentation. A good (and sufficient) number of policies and policy frameworks exist (based on international and Africa regional agreements) that facilitate and support engagement. What is lacking is commitment to implementation and to more effective implementation. Many government officials and civil society figures plan, implement, and participate in activities that consciously or otherwise support engagement. The presence of Africans in international organizations helps to promote and enable engagement, but it is not clear to what extent this help facilitates the incorporation of African perspectives. There is no direct allocation of resources for engagement activities. However, resources made available to regional and subregional activities invariably include portions for engagement.

Constraints: If effective and successful engagement requires robust and effective HIV/AIDS programs that show the desired clear impacts, then constraints to successful responses must also be accepted as constraints to effective engagement. Against this background, the team identified the following constraints: macroeconomic situation and unsustainable debt burden; often differing priorities of national governments and the international community; stigma, silence, denial, and discrimination; inadequate
resources and capacity; politics of funding; inadequate coordination and partnerships; recurring conflicts and natural disasters; generally weak health systems; traditional attitudes and practices; and lack of political stability.

**Case studies:** The team identified a number of strategies that have worked well in fostering African leadership on HIV/AIDS and bringing it to global decision making processes. These include the Great Lakes Initiative on AIDS, the Abuja Declaration of 2001, the 2005 Gaborone Summit Declaration, the Brazzaville Declaration, the Lomé Declaration on HIV/AIDS in Africa, the Millennium African Renaissance Program, AIDS Watch Africa, efforts by Africa’s First Ladies, and the African Development Forum. However, these cases need to be studied and analyzed further to sharpen and document lessons from them.

**Opportunities:** The team identified opportunities that are not well utilized for African engagement with global initiatives and forums. These include the New Partnership for African Development, the African Growth and Opportunity Act, AU annual summits, and forums supported by development partners such as SIDA, JICA, and the Korea International Cooperation Agency. These forums facilitate contact, dialogue, and planning, but they could be used more purposefully for engagement on global responses to HIV/AIDS. Efforts to document and disseminate successful strategies for enhancing African engagement, such as the case studies noted above, could also go a long way in helping Africans shape global responses to the pandemic.

**Information sharing:** Information sharing depends on the documentation, monitoring and evaluation, and knowledge management systems in place as well as the culture of information use in each country. Information sharing is weak and not systematic. The main channels include: websites, radio (public and private as well as rural), television (both public and private stations, with coverage varying from country to country and within individual countries), workshops and conferences organized by government or civil society organizations, research reports, and newsletters and similar publications. There is a large and wide range of newspapers of varying strengths and frequency of publication, purposefully or partially addressing the response to HIV/AIDS. Some are university-based, while others are published by civil society organizations and journalist organizations, such as FAMEDEV, based in Senegal, and Journalists Against AIDS (JAAIDS) in Nigeria.

**Lessons and good practices:** Most of the lessons and good practices identified during the research relate to various components of HIV/AIDS programs, rather than directly relating to strengthening African engagement with the international community. They include: involvement of people living with HIV/AIDS; multisectoral approaches; understanding and accommodating sociocultural and religious values; political commitment and government support at all levels; purposeful and streamlined coordination; and certain macroeconomic initiatives, such as the “debt for development” arrangement used to establish the Zambia HIV/AIDS Response Fund. With regard to engagement, lessons and good practices include convening and hosting preparatory meetings and related activities, commissioning and preparing background and working papers, and purposefully documenting and disseminating decisions and actions to build common platforms for discussion and negotiation with the international community.
Technical assistance and funding: Although countries may differ greatly in their capacity and resources, their needs are similar with respect to training, technical assistance, and funds for both HIV/AIDS programs and engagement with the international community. The needs expressed were many and varied. They include: sustaining the largely positive environment that currently exists; facilitating analysis and development of enabling policies and legislation; building human, program, and organizational capacity at all levels; and supporting implementing agencies to further define and fulfill their roles and responsibilities. A large number of local and international organizations, including intermediaries of donor and UN agencies, exist and assist with technical assistance needs. The three Technical Resource Facilities funded by UNAIDS are significant in this regard.

Accountability to African beneficiaries: Most respondents acknowledged that global policies, initiatives, and interventions have generally been responsive and sensitive to the basic needs of African beneficiaries. They also agreed that the international community has demonstrated its compassion, concern, and caring through mobilization and fundraising efforts. However, many respondents expressed the belief that developed countries are not always accountable to African beneficiaries and that a double standard is applied to beneficiaries and funders. Respondents offered thoughts on strategies for seeking greater accountability at the national and international levels. These include: recommending that African heads of state lead a social movement to make a minimum package of services available within the context of a rights-based framework; developing and strengthening national monitoring and evaluation systems; and developing and applying a framework for self-accountability by the UN system and other development partners, including civil society organizations.

III. CONCLUSIONS AND RECOMMENDATIONS

General: From the key informant interviews, it is clear that successful engagement of the international community requires knowledge, preparation, participation, and institutional capacity. The first three can be considered from the standpoint of individuals, while all four can also be considered at the institutional or organizational level. Some respondents felt that “leadership” should be added to the person-centered requirements. It was not clear from the interviews and the document review to what extent, if at all, any of these requirements have been systematically identified, nurtured, or otherwise promoted among African institutions that are engaged in the HIV/AIDS response and that are in a position to engage the international community. Capabilities and resources for, and their impact on, each of the individual requirements differ from country to country. However, even in the national AIDS control agencies, the team did not find systematic attention to all the requirements.

The research findings show that African perspectives are a present but weak factor in the global community’s response to HIV/AIDS in Africa. Respondents acknowledged poor leadership and inadequate empowerment of leaders, insufficient capacity among regional institutions to engage Africa in the global response to HIV/AIDS, weak advocacy expertise among leaders and institutions, weak performance of HIV/AIDS interventions, weak monitoring and evaluation systems, low allocation of domestic funds (especially funding for needed policy-oriented research and “think tank-type” activities), and unfulfilled international commitments.
Many recommendations were made to address the challenges and constraints for a better HIV/AIDS response agenda. They are summarized here:

**Leadership:** Leadership of the HIV/AIDS response should be broadened. Leaders should come from all levels of society. African leaders should stop paying lip service and drive the HIV/AIDS agenda themselves. They should aggressively and persistently lobby with global partners to bring in more help, financing, and technical support. And they should set up a specific African body solely to tackle the HIV/AIDS pandemic. Given that some of these leaders have their own foundations, they should be encouraged to align themselves with this proposed new body and coordinate their funding priorities to minimize overlapping arrangements and competing agendas and to maximize impact.

**Institutional capacity:** African institutions and organizations, such as the African Union and ECOWAS, should strengthen their roles in the response to HIV/AIDS. Specific, purposeful steps should be taken urgently to further mainstream strategic and operational HIV/AIDS response needs and to operationalize them in the activities of regional and subregional institutions. Given the strategic and policy frameworks already available, African countries should incorporate the essential elements of these frameworks in their own development strategies and programs for fighting the pandemic.

**HIV/AIDS programs:** Improving the performance of HIV/AIDS programs is indispensable for advocacy, leadership, and empowerment. Countries that achieve good performance are more likely to be listened to.

**Monitoring and evaluation:** Obtaining reliable, high-quality data is an important step toward improving performance and gaining the trust of local, national, and international partners. Monitoring and evaluation systems need to be strengthened to become more effective and more efficient. The monitoring and evaluating of engagement strategies and activities, in particular, must receive greater attention. This action area is important if Africa really wants to strengthen engagement with the international community. There must be a systematic way to document engagement strategies and activities, assess their effectiveness, and learn from experience to inform planning for more effective strategies.

**Local resources and commitment:** African countries and institutions must mobilize more domestic funds for their HIV/AIDS response programs and keep their international commitments. Moreover, each government should institute a resource mobilization fund for HIV/AIDS. Each relevant ministry should have a specific budget line for HIV/AIDS and see that it is increased year after year as necessary.

**Networking and exchanges:** Some of the networks that can be strengthened and utilized include the African Network on Advocacy, West African Network on HIV/AIDS (WANOSO), African Network on HIV/AIDS, South African Network on HIV/AIDS, East African Network on HIV/AIDS, and the Regional AIDS Training Network, based in Nairobi. Africans should strengthen regional programs that involve participatory planning and develop action plans that are informed by similarities and differences. Africans can then share best practices. Africans should create an African database on HIV/AIDS that can be shared with all through networking.