



Mainstreaming HIV in the Democracy and Good Governance Sector

Since 2003, it is a policy of the German Federal Ministry for Economic Cooperation and Development (BMZ) that all German Development Cooperation (GDC) programmes and projects in sub-Saharan Africa mainstream HIV, at least in countries with generalized epidemics¹ and especially in countries where HIV prevalence is five percent or more. Any mainstreaming HIV interventions must be planned and conducted jointly with GDC's partner organisations and be aligned with the partner country's sectoral strategies and national HIV strategy, thus adhering to the "Three Ones" principles. These require development partners to work through one national HIV strategy, one national HIV coordinating body and one national HIV Monitoring and Evaluation (M&E) system.

This guidance note discusses the *intersection of HIV and the democracy and good governance sector* and suggests ways in which programmes and projects in this sector can mainstream HIV.

What is the impact of the HIV epidemic on the sector? Some facts...

HIV-related morbidity and mortality can decrease government revenue and increase government expenditure: HIV strikes people in their most productive years (ILO, 2004). In countries with generalized epidemics, HIV can reduce productivity and cause deterioration in the investment climate. Macroeconomic studies indicate that, in countries with severe epidemics, the Gross Domestic Product (GDP) may be substantially lower than expected before the HIV epidemics escalated (Dixon et al, 2002; ILO, 2005). Through its adverse effects on macro-economic conditions, HIV has the potential to reduce the tax base and government revenue (Haacker, 2005). At the same time, effective HIV prevention and treatment depends on an increase in public expenditure (UN, 2008).



Human rights violations can lead to HIV infection and are one of the major barriers to HIV care, support and treatment (OHCHR and UNAIDS): From the beginning of the epidemic, HIV-related stigma and discrimination have worsened the impact of HIV on people living with HIV (PLHIV), their families and key populations at higher risk (UNAIDS, 2005). In many countries, women – including many widows who lose their husband to HIV – are by law denied the right to own property and have little access to legal recourse. Children orphaned or affected by HIV are denied the right to social protection, while many of those at higher risk (e.g., men who have sex with men, injecting drug users and sex workers), are treated as criminals and are denied many basic rights (OSI, 2007).

Uniformed services including the army and police are particularly vulnerable to HIV: Their age, mobility and work environments can expose members of the uniformed services to higher risk of acquiring HIV and other sexually transmitted infections (STIs) (UNAIDS website).

¹In a generalized epidemic, HIV is firmly established in the general population. Although sub-populations at high risk may continue to contribute disproportionately to the spread of HIV, sexual networking in the general population is sufficient to sustain an epidemic

Further possibilities to consider in countries with very high HIV prevalence²

HIV could undermine the stock of human capital needed for the delivery of essential state services

(ILO, 2004; Haacker 2005): HIV could undermine the ability of governments to respond to the HIV crisis by eroding government departments' capacity, institutional memory and efficiency through the loss of skilled staff and high levels of absenteeism. The quality and sustainability of services could be endangered by diminishing human resources and budgetary constraints that make it hard to recruit and train new human resources.

HIV could limit access to political participation and lead to political instability

(Chirambo, 2007): HIV-related economic under-performance of government and poor public service delivery could create political mistrust amongst voters. HIV-related morbidity and mortality could diminish the voting pool and reduce participation levels. People living with HIV and key populations more at risk could be discriminated against and excluded from influencing the political processes in their country.

In addition, HIV could be used as a tool for political manipulation of the public by political leaders who do not subscribe to democratic principles and offer overly simplistic solutions to the spread of HIV. Especially in countries with limited financial means, allocation of HIV relief to privileged classes and tribes and exclusion of others can exacerbate corruption and lead to clashes and political instability.

HIV could affect political parties' operations

(Chirambo, 2007): There are three levels at which HIV could affect the operations of political parties: the organisational level, through the loss of cadres and members; the financial level through the loss of subscriptions; and the leadership level through the loss of talent.

The burden of providing adequate care and support to orphans and vulnerable children (OVC) on a countries' social security system:

In countries with severe epidemics, the long-term impact of the steadily growing number of orphans could stretch social services and the state's social policies and social security system beyond their limits.

How could the activities of the sector inadvertently contribute to the spread of HIV?

Governments' lack of interest and commitment could block any effective response to the HIV epidemic:

National politics play a critical role in driving the response to HIV (Dickinson, 2006). Commitment to tailored and long-term HIV plans, where the term may be longer than the government's term of office, is essential to achieving sustainable results. Strong political commitment is evident in documented success stories, while HIV-ignorant governments can delay effective action, with catastrophic consequences.

Government officials could be negative roles

models: When the political elite practice stigma and discrimination through their lack of commitment to the HIV response and their statements and behaviour, they encourage other citizens to do the same.

In countries with very high HIV prevalence

Development strategies and processes may fail to address HIV adequately:

HIV can induce and deepen poverty, yet national development strategies and processes often fail to recognize and address HIV as a development challenge. Instead, HIV-related strategies and processes are often separate and unconnected and this weakens both sets of strategies and processes (UNICEF and World Bank, 2004).

Global financing mechanisms for HIV could overwhelm the government's capacity:

Many developing countries lack the capacity to ensure accountability for the expenditure of HIV funds, and also lack mechanisms for ensuring that all worthy stakeholders have access to those funds. One result is that countries sometimes fail to take advantage of available funds, so they go unused, and another is that countries often mismanage funds so they are not put to best possible use.

In what way could the sector contribute to curbing the spread of the HIV epidemic or to mitigating its impacts?

Promoting the human rights of people infected and affected by HIV and of key populations at higher risk:

Support governments in meeting their obligations to ensure that their responses to HIV respect the human rights of all vulnerable populations. National HIV strategies and processes should ensure a human-rights-based approach to HIV.

Only in countries with generalized HIV epidemics and especially in countries with very high HIV prevalence

²HIV prevalence is considered „very high“ in countries where it exceeds 10 percent in the sexually active age group (15-49 years) of the general population.

Strengthening the capacity of government to develop, implement and monitor its HIV response:

The Commission on HIV/AIDS and Governance in Africa (CHGAR, 2008) concluded, “the long term goals of reversing the spread of HIV and providing care and support to millions of people infected and affected by the epidemic cannot be achieved without stronger public sector performance and a responsive governance regime”.

National AIDS authorities and other relevant state institutions often need technical support: to manage funds in a transparent and democratic manner (e.g. through peer review mechanisms), with the active participation of the private sector and civil society; to take a human-rights-and-gender-transformative approach; to take into consideration the needs of youth, orphans and other vulnerable groups (UNICEF, 2008).

Supporting the inclusion of HIV-related strategies and processes in development strategies and processes:

Poverty Reduction Strategy Papers (PRSPs) are key instruments for setting and achieving poverty reduction and other national development goals. Linking HIV policy with broader social and economic policy and using development strategies and processes to implement HIV policy helps to ensure that the HIV policy is taken into account and addressed in meaningful and realistic ways in national budgets and financial processes (UNDP, 2006).

Facilitating HIV mainstreaming in all government sectors:

There is often need for advocating for the integration of HIV responses into the policies and programmes of national government ministries and of provincial and local governments. In very high prevalence countries, most ministries and departments should consider the current and future impacts of HIV on their sectors and what ways they can contribute to HIV prevention and impact-mitigation.

Supporting the development, implementation, monitoring and evaluation of workplace programmes in the public sector:

The weakening of government institutions by HIV can be avoided through development and implementation of HIV workplace policies. They should cover prevention, treatment and impact mitigation and require a working environment free from stigma and discrimination against PLHIV and their families.

GDC Examples

Empowering district and local authorities

The Governments of Lesotho, Tanzania and Mpumalanga have all recognized the importance of “bringing the AIDS response home” to even the smallest, most remote villages (GTZ, 2007). This means giving people opportunities to assess their own needs for HIV-related programmes in all sectors and to

participate in the processes whereby higher levels of government and international donors allocate money and other resources.

The three governments have been encouraging district and local authorities and their councils to establish AIDS committees with broad representation from key stakeholders in their communities. Typically, these include elected and traditional leaders, people living with HIV, women and youth, community-based agencies and organizations (including faith-based ones) and private businesses. The German Technical Cooperation Agency (GTZ) has been providing technical support to get these committees up and running.

More specifically, in Lesotho, a country with 23% HIV prevalence, GDC has been providing technical and financial support to the Gateway approach. This is a planning approach that assists all 128 Community Councils in Lesotho to prioritize community-level HIV interventions that are in line with the National HIV Strategic Plan. Its implementation started in May 2008. The amount of R 31,500 was issued to each Council through the National AIDS Commission and Global Fund for the initial implementation of prioritized plans. Additional funds will follow in Year Two. Partner institutions include the Ministry of Local Government and Chieftainship, the National AIDS Commission and UNAIDS and the World Bank.

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Further Reading

A selection of articles on mainstreaming HIV in the democracy and good government sector can be found on the GDC Mainstreaming HIV internet platform at <http://sites.google.com/a/ms-hiv-gdc.org/mainstreaming-hiv-in-german-development-cooperation/Home/sectors-priority-areas/democracy-and-good-governance>. To join the Group, visit <http://ms.hiv.aids.googlepages.com/home>.

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