

**HIV/AIDS AND DEVELOPMENT IN ASIA AND THE PACIFIC**  
**A LENGTHENING SHADOW**

A  
MULTI-MINISTRY  
STRATEGY TO THE  
EXPANDED RESPONSE  
TO HIV/AIDS

9-10 OCTOBER 2001 MELBOURNE AUSTRALIA



The Australian Government's Overseas Aid Program

## A Multi-ministry Strategy to the Expanded Response to HIV/AIDS

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The United Nations Economic Commission for Asia and the Pacific has estimated that 7.5 million people are living with HIV/AIDS in the region. In South and South-East Asia, it is estimated that 700,000 adults were infected in the year 2000, whereas in East Asia and the Pacific there were some 130,000 new infections. There is recent evidence of rapidly growing infections in some populations and geographical areas. Furthermore, the Asia-Pacific region accounts for 60% of the world's population so even relatively low HIV prevalence will translate into high numbers of people living HIV/AIDS.

Over the last 20 years, evidence has accumulated in support of the need for an expanded response approach to HIV/AIDS that extends beyond the health sector and mobilises all necessary societal resources to combat the disease. The reinforcing programmes of risk, vulnerability and impact reduction are the key elements of an expanded response to HIV/AIDS. This approach is essential to break the descending spiral of increased risk, increased vulnerability and increased impact that drives and perpetuates an ever worsening epidemic. In order to achieve this goal and thus to change the course of the epidemic, a country must reach most of its population in the shortest possible period of time and in a sustainable manner. This can be done through the work of ministries and sectors in the country that already are reaching to the population from a different angle according to their development, social and business agendas.

In addition, the need for adopting a Multi-ministerial strategy stems from the fact that HIV/AIDS is a threat to social and economic development, and as such demands their full commitment if a human and development crisis is to be avoided in the Asia-Pacific region. Each ministry can motivate and facilitate involvement in the AIDS response, of different sectors such as health, education, agriculture, commerce and transport that the ministry works with according to its mandate. For example, Ministry of Education is already in its regular work reaching young people and teachers, and thus it can integrate AIDS work into the education system. HIV prevention work also helps reducing impact of AIDS on the education system. Multi-ministerial involvement in the National AIDS Programme and Committee and integration of AIDS in to national development plan ensures that large pool of government resources are mobilized and shared and ministerial activities co-ordinated for sustained impact. Therefore, one of the primary requirements for an expanded response is that governments demonstrate a high level commitment to fighting HIV/AIDS through mutually reinforcing multi-ministerial action set within the framework of a National AIDS Strategic Plan

The model detailed in figure 1 provides a visual illustration of a multi-ministerial response. It details how all ministries can be mobilised to lead a particular sector in the fight against HIV/AIDS given their specialist knowledge and defined national development mandate. The roles of the different ministries are summarised below:

*Office of the Prime Minister* – The Prime Minister has a key role in demonstrating highest national commitment coordinating the multi-ministry commitment, monitoring overall ministerial performance and where possible ensuring that public information

and advocacy create an environment conducive to battling the epidemic. The Office is also important for ensuring effective inter-ministerial collaboration, facilitating partnerships, mobilising government and societal resources.

*Ministry of the Interior* - The Ministry is important because it sets the domestic policy environment in which HIV/AIDS prevention programmes are implemented. This can either facilitate or sometimes, unintentionally, obstructs interventions designed to reduce the vulnerability of target groups. It may also control provincial government structures important to the national response.

*Ministry of Health* – It has a central role in co-ordinating the national HIV/AIDS response within government. It is also responsible among others for HIV/AIDS surveillance, prevention measures in healthcare settings and providing care and treatment for PLWHA.

*Ministry of Labour* - In view of the potential impact of HIV/AIDS on economic production through the effects on labour supply, absenteeism, increased training and recruitment costs to replace lost employees and skill shortages in specific areas, combating the disease is firmly within the Ministry's mandate. Promote and support AIDS in the workplace, policy HIV prevention, care and support in the world of work which includes employees and employees' workplace and organizations. It also can ensure supportive environment for mobile labourers to reduce their vulnerability to HIV risk.

*Ministry of Education* - The Ministry has the technical expertise and the means of accessing the AIDS issue through the school, higher education system, and non-formal education a large proportion of the young people vulnerable to the disease.

*Ministry of Transport* - It has an important role mobilising the response in the transport sector. It can ensure that the AIDS programme reaches transport workers, migrant workers and other mobile populations. The transport sector can also provide good venues to reach other target population and general public.

*Ministry of Defence* - Military personnel in countries and those in peacekeeping forces are particularly vulnerable to HIV/AIDS and the Ministry has a mandate to protect the health and well being of its personnel and their family.

*Ministry of Social Welfare* - The Ministry of Social Welfare has the important role of integrating HIV/AIDS into social support systems and social welfare.

*Ministry of Agriculture* – HIV/AIDS has a significant impact on food production and endanger rural development and food security so the fight against the disease is firmly within the Ministry's mandate. The Ministry through its work such as extension workers and agricultural information dissemination can efficiently reach agricultural rural population which are majority of the country's population.

*Ministry of Planning* - Mobilising the expertise of national planners and their linkages across government through the national planning process, and enhancing significantly multi-ministerial participation in integrating AIDS into the National Development Plan and addressing development issues in the National AIDS Plan especially those relating to vulnerability reduction.

*Ministry of Finance* - It has a crucial role because it co-ordinates the national budget setting process and can ensure that the systems for allocating resources to ministries are efficient and reflect their proportionate involvement in the national response.

*Ministry of Trade and Industry* – The Ministry has a key role in ensuring that the commercial environment is supportive of the national response and in promoting workplace programmes. Policies concerning trade assist in ensuring the availability of HIV/AIDS commodities (e.g., condoms, medicines) at affordable prices and promote, as appropriate, the development of local manufacture.

*Ministry of Culture, Sport and Youth* - It can ensure the active participation of youth in the planning process through national and local youth organisations. Television, radio, internet, magazine, sporting, cultural events, and peer education can raise HIV/AIDS awareness among young people.

*Ministry of Women's Affairs* - The gender dimension of the epidemic cannot be over emphasised, as women are more vulnerable to the disease. The Ministry has a key role in developing and implementing cross-ministerial policies to reduce risk and vulnerability to HIV/AIDS of women and their spouse.

*Ministry of Public Information* - The government in most countries has influence over both the public and private sector print and broadcast media which can be used to communicate effective prevention messages to the general population and target groups such as young people as well as messages to reduce discrimination.

*Ministry of Foreign Affairs* - A range of regional issues such as migration, conflict, trade and transportation have an impact on HIV/AIDS. The Ministry has a role in coordinating involvement in regional and inter-governmental initiatives such as the ASEAN Taskforce on AIDS, and the Secretariat of the Pacific Community.

*Ministry of Tourism* - The Ministry has a major role in working with the tourist and hotel industry such as to develop work place based HIV/AIDS programmes and AIDS education to tourists through the tourist industry.

High-level commitment of Heads of Government is needed to lead a shared understanding amongst senior ministers and civil servants of HIV/AIDS as a fundamental socio-economic and development problem. This commitment and shared understanding provides a firm foundation for establishing a multi-ministerial response to the epidemic. Governments may consider some political, organisational, planning and budgetary mechanisms that provide the necessary incentives, and enable the multi-ministry programme to be implemented and sustained.

Strategies for achieving a multi-ministerial response can include:

- a) Political and Organizational Strategies:
  1. Inclusion of all relevant ministries
  2. High-level ministerial involvement in the National AIDS Committee (NAC)
  3. Developing HIV/AIDS capacities across all Ministries
  4. Head of Government's commitment to the national HIV/AIDS response
  5. NAC secretariat is effective in coordinating a multi-ministerial response
  6. Multi-sectoral participation in the NAC
  7. Implementation of a similar structure at local level (province, state, district)

- b) Planning Strategies
  - 1. Integrating AIDS into National Economic and Development Planning
  - 2. Integrating HIV/AIDS into impact assessments of major development projects
  
- c) Budgetary Strategies
  - 1. Allocation of AIDS budget to ministries according to its mandate in national development and priority areas in the National AIDS Plan
  - 2. Mainstreaming allocation of AIDS budget into existing planning and budgeting process in each *ministry*

There are *political and organisational strategies* aiming to ensure that sufficient political authority at national, provincial and local levels is exercised to drive multi-ministerial participation, and that a co-ordinated and effective response is achieved through supportive organisational structures. National and provincial strategies should be based on a realistic situation assessment and response analysis.

At a national level the development of a National AIDS Committee (NAC) with a wide membership spanning all relevant government ministries is the most important strategy for achieving a multi-ministerial response. The effectiveness of the committee is maximised when all relevant ministries are involved, and there is high-level ministerial representation. The NAC Secretariat needs to be resourced to enable effective coordination, and technical assistance to ministries to help develop their institutional capacities in HIV/AIDS. The level of involvement and commitment of the Prime Minister's Office to HIV/AIDS increases the degree of cross-ministerial support and participation in the NAC. This involvement of various ministries sends a strong signal to everyone and every sector in the country that the government as a whole is fully committed to the fight against AIDS and that the fight requires help from more than one sector. The participation of civil society and the private sector in the NAC widens the multi-sectoral response to include a broader range of stakeholders. The NAC needs to ensure through appropriate member selection and the inclusion of women's organisations that it is able to fully respond to the gender dimensions of the epidemic. People living with or affected by HIV/AIDS provide invaluable insight into the nature of the epidemic and should be included in the membership of the NAC.

Increase in government budget on AIDS is needed as it will demonstrate a collective commitment by all ministries. In addition, to reinforce a sustainable commitment and implementation by participating ministries, it is important to introduce the *budget mainstreaming strategy*. If each ministry is asked to express their commitment into actions, it should have access to some additional budget for AIDS in addition to using part of its existing core resources. The manner which ministries have access to additional budget significantly facilitate or hinder their willingness and efficiency increases when the AIDS budget request is mainstreaming into the regular budgeting process of each ministry. This means at the beginning of the budget year, each ministry already knows how much budget it has for AIDS and its AIDS programme is an integral part of its regular work. On the other hand, the willingness, planning ability and efficiency in implementation will reduce if ministries must request funding for each AIDS activity one at a time and it's done outside of their regular annual planning and budgeting process.

The *budgetary strategy* needs to ensure HIV/AIDS resources are distributed to ministries, on the basis of the National AIDS Plan thereby encouraging rather than discouraging participation in the national HIV/AIDS response. In many countries, a specific HIV/AIDS budget is provided in order to spearhead the national response to the disease. However, this does not mean that the budgetary process for HIV/AIDS

funds should be separated entirely from normal government budgetary processes. Also, the AIDS budget for different ministries should be reviewed by the NAC but then approved and allocated through normal government budgetary mechanisms.

In many countries, the resources provided by bilateral and multi-lateral agencies are often substantial and dwarf the funds provided by the government. Resources may be allocated to individual ministries to address sectoral priorities as detailed in the National AIDS Plan. The Ministry of Finance needs to develop effective systems that ensure bureaucratic delays in the disbursement of HIV/AIDS funds to ministries and provinces do not impede progress. The NAC has an important role in monitoring resources deployed by ministries according to the National AIDS Plan.

Establishment of Provincial AIDS Committee (PAC) is another strategy to bring active participating of various ministries and sectors. This applies also for State AIDS Committee on District AIDS Committee. This strategy will enhance use of existing administrative structures and community capacities in provinces and districts to facilitate the development of an HIV/AIDS response at the local level. The effectiveness of the approach will as with the national response be affected by the degree to which provincial representatives from various all ministries are included in the PAC, the commitment of the Provincial Governor as Chair of the PAC, the effectiveness of secretariat support to the PAC, inclusion of civil society including People Living with HIV/AIDS and the private sector in the PAC and the consideration given to gender in PAC membership.

It is important to ensure that there is consistency between national and provincial priorities whilst reflecting appropriately local dimensions of the epidemic. As similar to the requirement for success at national level, capacity building by the Secretariat of PAC (usually Ministry of Health) for each provincial ministry office is required. In turn, each ministry can also help pulling commitment and contribution from relevant sectors and build their capacity for the AIDS response. Also, the mainstreaming of HIV/AIDS allocations for each ministry within provincial budgets rather than through project based application mechanisms will enhance the ability of provinces to mount a timely response.

The development of a National AIDS Plan by the NAC involving all relevant ministries is creating a multi-sectoral response to HIV/AIDS. This can be further enhanced through the *planning strategy* – that is an integration of AIDS into the national social and economic development plan. This strategy not only helps mainstreaming AIDS into regular work of each ministry, but also benefits long-term economic and social development planning including pre-approval/implementation impact assessments of major development projects in relation to AIDS. In addition, such integration will allow the AIDS programme to have access to the national overall development budget.

As many of the key determinants of vulnerability to HIV infection are socio-economic in origin, the AIDS response cannot be effective without addressing broader development factors. Likewise, governments cannot hope to improve development indicators if the response to HIV/AIDS and its social impact are insufficient. The integration of HIV/AIDS into national social and economic planning is a strategy that recognises the interconnectivity of HIV/AIDS and development and promotes multi-sectoral solutions to the epidemic. HIV/AIDS should also be a key issue during the development of poverty reduction strategies for the country.

This strategy improves linkages with national development programmes, utilises the experience and skills of national development planners, and facilitates access to

ministry resources and to the national development budget. It also ensures political commitment at the highest level, places the national AIDS response within a long-term development ethos, coordinates the response across government ministries and creates a wider national partnership. National development planners are good and necessary allies in mainstreaming AIDS into development into work of all ministries and in the increase of government budget on AIDS.

A further rationale for integrating HIV/AIDS into social and economic planning process is to ensure development plans do not exacerbate the epidemic. Major development projects such as construction of a highway or the creation of a Free-Trade Zone may exacerbate the epidemic by promoting rapid urbanisation, splitting families and depriving individuals of familial social support systems. Agricultural development projects that replace farm labour with machines can reduce food security of many farmers and drive them to become migrant workers in cities who are vulnerable to HIV risk behaviour.

It does not, however, mean that such development projects should not be implemented. The government and development planners must examine the AIDS impact of the projects and find ways to reduce the impact during the planning stage. These developments have implications for the spread of HIV/AIDS, which are often not foreseen. The mainstreaming of HIV/AIDS into the plans and programmes of the ministries with a mandate for such developments including the Ministries of Planning and Development, Industry, Foreign Affairs, Trade, Transport and Tourism enable the impact of such developments to be assessed in the same way as environmental implications. A practical tool to assist decision makers and project promoters has been developed by a group of universities from throughout the region.

Government ministries can orchestrate the sectoral response to HIV/AIDS in accordance with their mandate, expertise and area of comparative advantage. The AIDS Committees in each ministry should be set up. It has a key to identify the factors that influence risk behaviour and vulnerability to HIV/AIDS in a particular sector and population groups, the potential sectoral contribution to reducing risk and vulnerability in specific populations. The Committee can lead the development of sectoral plans that direct the ministry, civil society and the private sector responses from the particular sector in support of the National AIDS Plan. Here are some examples:

The **Ministry of Health** takes the lead in mobilising the health sector and has a key role in the coordination of a multi-sectoral response with the support of the Head of Government. The transport sector is interconnected with target groups such as transport workers, migrant workers and other population groups who are particularly vulnerable to HIV infection. This means that the **Ministry of Transport** has a potential key role in mobilising a sectoral response to HIV/AIDS. The **Ministry of Labour** can mobilise response from the world of work through preparing and promoting legislation for basic work-related rights of HIV infected employees, mandating the introduction of codes of practice into the work place, and helping to promote the benefits to employers of introducing work based sexually transmitted infections and HIV/AIDS programmes. It can also promote the development of Business HIV/AIDS Coalitions, which have proved useful in ensuring humane workplace policies, and effective prevention programmes.

In the rural sector, the loss of rural labour to HIV/AIDS reduces food production and endanger food security. At least seven million agricultural labourers in Africa were already lost due to AIDS. **The Ministry of Agriculture** has a key role in developing responses, which help to mitigate the loss of rural labour by modifying agricultural

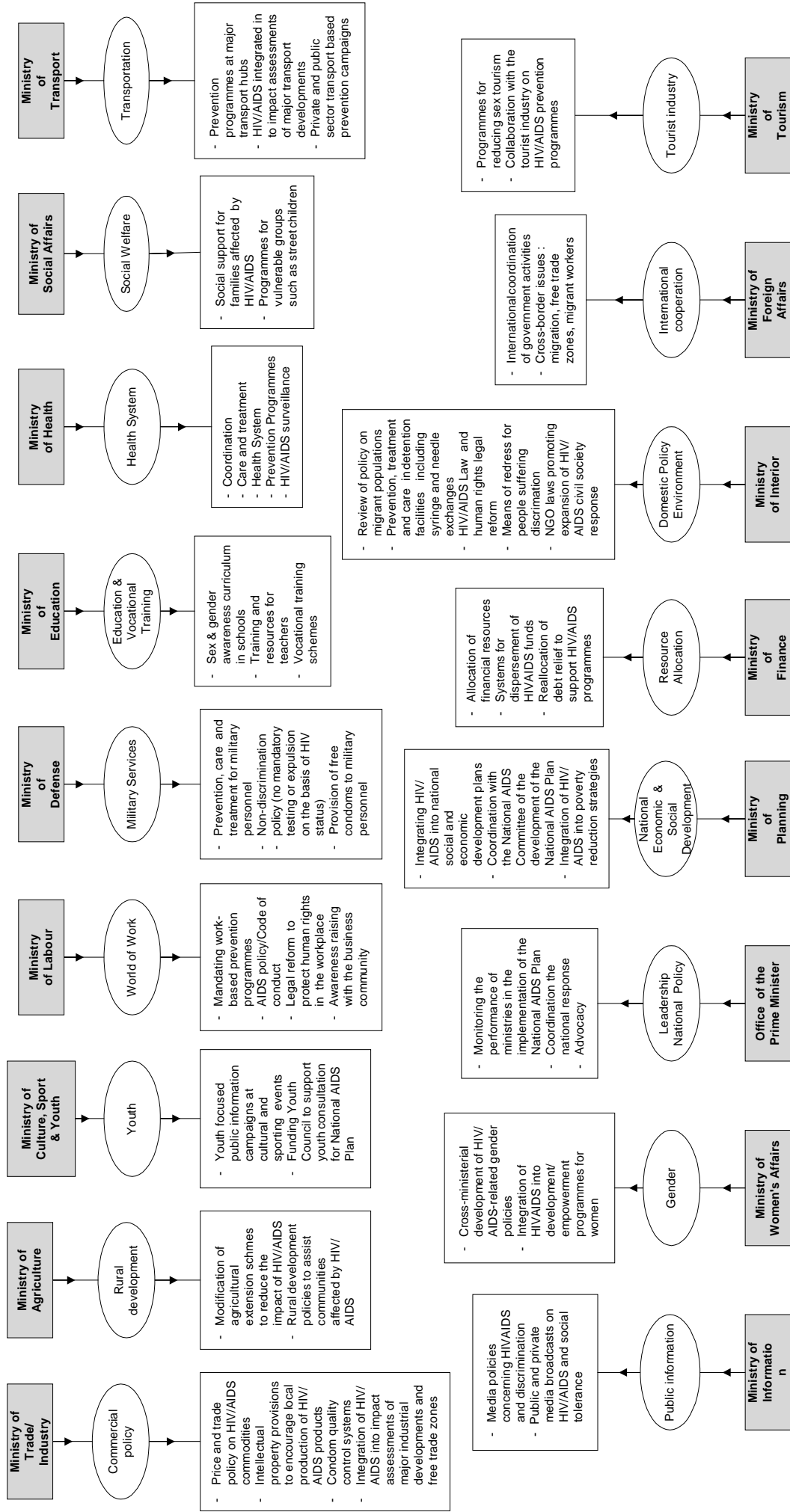
extension schemes, and encouraging agriculture-based outreach prevention programmes. Measures can serve to reduce the economic burden of the disease resulting from the increased cost of medical care and support, the loss of agricultural labour and increase in economic dependency.

There are many good examples in many countries of how each ministry integrates AIDS into their existing mandate and responsibility. A few examples include: school AIDS education by Ministry of Education in Australia, Philippines and Myanmar; HIV prevention programme in the military by Ministry of Defence in Cambodia, Bangladesh, Laos and Nepal; AIDS education and HIV prevention programme for young migrant workers by the Ministry of Railways of China and of Mongolia; AIDS in the world of work programme by Ministry of Labour in Thailand; programmes to sensitise the regional press on the issue of HIV/AIDS by the Press Information Bureau of the Government of India; and enacting and implementation of the Philippines AIDS law requiring local authorities to implement AIDS programme was done by the Ministry of Justice and Ministry of Health with support from the Parliament and President of the Philippines.

The personal leadership of Prime Ministers: for example the address by the Prime Minister of India in 1998 to the Parliament that AIDS as a national health crisis; chairing of the National AIDS Committee by Thailand's Prime Minister since 1991; the ongoing leadership by numerous leaders including Malaysia's Prime minister Dr Mahathir and Papua New Guinea's Sir Mekere Morauta; and at the Millennium Summit of the UN calls for the need to tackle HIV/AIDS by Presidents and Prime Ministers of Bangladesh, India, New Zealand, Tonga, Micronesia, Marshall Islands and Vietnam.

With leadership and coordination from UNAIDS, the UN system has been providing support to various ministries to interpret AIDS into their work. These include the UNAIDS Co-sponsors (UNICEF, UNDP, UNFPA, UNDCP, UNESCO, WHO, World Bank), ILO, FAO and Office of the High Commissioner for Human Rights.

**Figure 1 : A Model of a Multi-ministerial Response to HIV/AIDS**



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