

**STRENGTHENING NATIONAL CAPACITY FOR HIV/AIDS STRATEGIC PLANNING**

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**A. INTRODUCTION**

Strategic Planning is essential for an effective response to the epidemic. UNDP has extensive experience and long involvement in the strengthening of national planning capacity in all operational regions. As such it is essential that UNDP apply its general experience in planning together with its understanding of capacity development, to the issue of how best to produce the next generation of national HIV/AIDS Strategic Plans. It is now recognised by many countries that Plans need to be both multisectoral and be the outcome of processes which are socially inclusive. In part the purpose of the Plan is to identify and prioritise operational activities, and in part to serve as a mechanism of social mobilisation. It follows that Strategic Planning is not simply a technical problem but is also one of governance. Integrating Strategic Planning within a framework of governance is an important activity for HDP/UNDP and its collaborating partners in UNAIDS.

**B. PRINCIPLES**

Medium Term Plans (MTPs) have become, together with National Strategies and Policy Frameworks, important organising structures for the design and implementation of country responses to HIV and AIDS. These key instruments were developed in the past with the assistance of GPA (WHO) and other multilateral and bilateral donors. In their essence these were initially and primarily ways of organising public health responses to the epidemic, although over time transformation did take place as the public health definition of the problem was perceived to be too narrow. Thus it is now commonplace to argue, and for it to be generally accepted, that the HIV epidemic is much more than a health problem and that an effective response needs to be both multisectoral and multidimensional.

MTPs have, over time, become more complex with elements which address socio-economic and cultural determinants and consequences of the epidemic, and legal, ethical and human rights aspects, as well as the more traditional public health concerns. In this process of MTP widening and deepening a much broader range of institutions -- national and international -- have been involved, both in the development of the plans and in their implementation.

Nevertheless, MTPs in their construction and in their core elements have remained largely focused on public health concerns. They have continued to be designed in ways which are, to an unnecessary degree, unrelated to individual national concerns, unreflective of local conditions relating both to the epidemic and more generally to development, and to a great extent structured independently of national commitment and capacity. As such, MTPs, whatever their theoretical merits in providing a national (largely central government) framework for planning responses to the epidemic, have continued to be largely designed by outsiders using processes which do not sufficiently draw on local expertise and knowledge.

It is unsurprising, therefore, that MTPs have been an inadequate framework for organising and planning a truly national response to the epidemic in most countries. They have been seen more as an essential pre-requisite for donor finance for HIV and AIDS activities largely undertaken by central government than as plans which are really reflective of national needs, aspirations and capacities. In a word, they have never been nationally owned and, as such, have failed to stimulate the commitment and broad-based response which an effective

HIV and AIDS programme demands.

Certain key principles can be derived from past experience:

- A national Strategic Plan for HIV/AIDS is an important and useful instrument for organising the national, not simply governmental, response to the epidemic. Such a Plan requires as a corollary an existing National Policy Framework for HIV and AIDS which establishes a set of policy principles for each of the important policy areas relevant to HIV and AIDS. Both of these instruments for an effective national response need to be designed by methods using participative processes.
- A Plan should be multisectoral and multidimensional encompassing both public health concerns as well as more broadly defined aspects of the epidemic.
- For a Plan to be useful as a guide to resource allocation and as a framework for the national response it must reflect the state of the epidemic in the particular country; the local socio-economic and cultural and political conditions, and the national capacity to design and implement policies and programmes.
- To ensure that the Plan is relevant and that it truly reflects national needs, understanding of the epidemic and capacities, it is essential that processes be utilised in the development of the Plan which are broadly inclusive and genuinely participative.
- A participative process is more than a way of ensuring that knowledge is tapped and understanding and experience brought to bear on the design of the national Plan, and thus relevance to national conditions. It is also the only way to ensure national ownership and commitment by all.
- Furthermore, a participative process has the ability as an output of the process itself of creating an understanding of both the Plan objectives and of the means whereby these are to be achieved amongst those who will undertake, or can effect, the implementation of many of the activities of the Plan.
- Both insiders and outsiders need to be aware of good process practice if the Plan outcome is to be successful. Both need to recognise that their role has always to be, and be seen to be, facilitative rather than one of direction. This requires new and better development practice on the part of all those involved in the process of Plan development, irrespective of whether they are insiders or outsiders.

## C. OBJECTIVES

These can be enumerated very simply, and are as follows:

- To design a Strategic Plan for a five year period which is a framework for the national response to the HIV epidemic, and which is consistent with the National HIV /AIDS Policy Framework. If a National Policy Framework does not exist then this will need to be designed following the principles outlined in B as a prerequisite to the development of the Plan.
- To formulate a Plan that is genuinely national in scope and encompasses the programme activities of all layers of government (both central and local), the private sector, international and national NGOs and CBOs, and all other organisations active in the country in areas relevant to the response to HIV and AIDS.
- To develop a Plan that is both multisectoral and multidimensional, and as such to identify activities relating to public health, social and economic determinants and consequences of the epidemic, legal, ethical and human rights issues, community development, and other matters relating to social and political organisation and mobilisation.
- To identify through the Plan process the resources available to the country in its response to HIV and AIDS, and to specify appropriate modalities for the achievement of Plan objectives over the plan period. The planning horizon for the Plan will be 5 years with years 1 and 2 firm and years 3-5 in broad outline only and subject to revision during the second year of Plan operations.

## D. STRATEGIC PLAN DEVELOPMENT: PLAN PROCESSES

These will be dependent on local conditions including the state of the epidemic, organisational and institutional structures, cultural, political and other factors, including experience with participative approaches to development practice. The Plan process needs to build on national resources and strengths wherever possible, including the integration of the Plan for HIV with national planning processes and the Development Plan. Where conditions for a fully participative process are absent, and there is an associated inadequate understanding of process approaches to development, together with a weak cadre of individuals with appropriate skills in facilitation, then these will need to be remedied by prior programme activities. Strengthening capacity in participative approaches to development is an essential first step in the design of a participative process for generating a successful Plan and one which will enable the drawing down of local experience of the epidemic and understanding of development conditions in the country.

The following are possible key steps in the process:

- Discussions between UNAIDS and the NACP about how to take forward the development of the Plan. This process needs to

elaborate Plan objectives, time frame for the process and for the Plan, and resource needs for the Plan development process.

These discussions should identify the main national actors important in the process of developing the Plan -- within central and local government, other public organisations, private business sector, local and international NGOs, including organisations representing the HIV infected and affected, and the international development community. It is important not to limit those whom it is proposed to involve in the Plan to organisations currently responding to HIV but to also engage others who have the potential to develop effective responses both nationally and locally. Gender balance has to be an important consideration in the selection of organisations and individuals who will be involved in the development of the Plan.

- Having established a list of organisations and individuals which a priori seem important for the development of the Plan the next step might be to convene a Workshop to develop in detail the process for Plan development. It is crucial that this be a facilitated discussion with the aim of reaching agreement on the processes of participation. These subsequent meetings, discussions etc. will have as an important task the role of identifying the main building blocks of Plan activities. The Workshop needs to be as free ranging a discussion as possible with all participants encouraged to voice their views about how best to ensure extensive participation in the development of the Plan. A crucial objective should be to structure the process of Plan development so that it builds on grassroot activities -- and feeds the recommendations for programme activities from below to higher levels of the Plan process. The Workshop should also discuss and make recommendations to the NACP about the functions and responsibilities of a Directorate for the Plan, including specification of the role of external facilitators in the development of the Plan.
- The recommendations of the Workshop should be forwarded to the NACP (who would have participated fully in the meeting) for their consideration and action. It would be appropriate at this point, after initial consideration by Government, for there to be extensive discussions with donors about their assistance in the process of Plan development. In light of these and other discussions, a Plan Directorate should be established reporting to the NACP. The Directorate would have the responsibility for managing the process for the development of the Plan in accordance with a timetable and process which has been agreed by the NACP. UNAIDS would commit itself to resourcing the development of the Plan and will identify with the NACP both local and international consultants who will assist in Plan preparation.
- The identification of Plan programme activities needs to come from those involved in the response and this has to entail a Plan development process which facilitates discussion of the main issues raised for the country by the HIV epidemic. This entails a process of structured workshops, focus group discussions etc. with relevant interest groups. A process which is extended over time and quite different from the ad hoc and often unstructured meetings which are typical of traditional consultant-led praxis. Neither the identification of problems nor programme activities for their amelioration should be the sole responsibility of local or international consultants -- their role should be facilitative, with the drawing-down of their expertise when and where required by those participating in the development of the Plan. This Plan process will inevitably take time since there will have to be representative discussions amongst all the main interested groups. With a focus on what appear to be the most important issues facing the country in establishing an expanded and effective response to the epidemic.
- The Plan Directorate should service the whole Plan process -- preparing documentation and managing process facilitation for the discussion groups, etc., and helping with the recording of the discussions and detailing the recommendations. It would be responsible for the distribution of reports of the discussions, etc., and for scheduling and managing regional and national seminars/workshops where the reports would be discussed.
- Reports and recommendations from the Workshops would be the basis of the draft Plan and the first draft(s) would be the responsibility of the Plan Directorate. UNAIDS will resource in appropriate ways the crucial step of preparing the draft Plan -- again utilising facilitative processes which draw on national and international expertise. The draft Plan would then be submitted to a national workshop for its consideration and review. Recommendations from the national workshop would be integrated in a revised Plan; this would be submitted to Government and subsequently be the basis of discussions with UNAIDS and other donors for their support. Once agreement had been reached about resourcing of the Plan then it would be resubmitted to Government and, if accepted, be published as the country's Strategic Plan for HIV and AIDS. An important element in the process of preparing the Plan is the identification of potential resources for activities, so that once the Plan is finalised there already exists information on resource commitments for the Plan.
- This is not the final step in the process. The Plan is only a framework although it is an important element in an effective response to the epidemic. Operationalising the Plan in ways that are themselves participative is critical for a truly national response. While the Plan development process will have created some social capital this will not be enough for an effective response to the epidemic. The subsequent steps in designing and implementing programme activities need themselves to be based on processes which are socially inclusive. This is the only way to achieve the mobilisation of effort at all levels and across all sectors of society which are essential for an expanded response to the multiple challenges created by the HIV epidemic.

## MONITORING AND EVALUATION

An important element in Plan formulation and subsequent implementation are effective processes for monitoring and evaluation. The Plan process is designed to be participative in order to draw on relevant national and personal experience both of the epidemic and of development. The same principle operates for monitoring and evaluation which also needs to serve multiple objectives. These objectives include participatory processes for the design of evaluation methodologies; the bringing together of those preparing programmes and projects, those who are to be evaluated, and those who will undertake evaluations. Far too often evaluation and monitoring are seen as

separate rather than integrated activities. They are rarely related in their methodology to the objectives of programmes and projects, and are thus both in process and design unreflective of the underlying purposes of planned activities. One result of "normal" monitoring and evaluation is thus a failure to learn the important lessons of programme experience. Strengthening capacity for monitoring and evaluation and ensuring that lessons of effective programming are integrated in activities is critical for Plan performance.

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## **BIOGRAPHICAL NOTE**

Desmond Cohen is an economist with university teaching experience in Africa, Canada, the UK and the USA. Formerly he was a Governor and Associate Fellow at the Institute of Development Studies, University of Sussex in the United Kingdom and until 1990, he was Dean of the School of Social Sciences. He has both research and applied macro-economic policy experience in a number of African and Asian countries. Previously he was an adviser to the British Treasury on international financial policy. In 1997-98 he was Director of the HIV and Development Programme (UNDP), and currently he is Senior Adviser on HIV and Development.