



Executive Summary

Introduction

At the United Nations General Assembly Special Session (UNGASS) dedicated to HIV/AIDS held in June 2001, all 189 UN members adopted the Declaration of Commitment on HIV/AIDS. The Declaration states what governments have pledged to do – themselves, with others in international and regional partnerships, and with the support of civil society – to reverse the epidemic. The inclusion of persons infected and affected is vital to ensure that government policies and actions are responsive to the needs and realities of persons living with HIV and AIDS.

The UNGASS Declaration of Commitment on HIV/AIDS (DoC) sets out concrete, time-bound commitments to ensure a comprehensive and effective global response. In particular, through Article 94 of the Declaration, countries commit to: “Conduct national periodic reviews involving the participation of civil society, particularly people living with HIV/AIDS (PLHIV), vulnerable groups and caregivers, of progress achieved in realizing these commitments; and identify problems and obstacles to achieving progress and ensure wide dissemination of the results of these reviews.”

The Declaration is a powerful tool to guide and secure action, commitment, support, and resources. With many targets set for 2005, and the UNGASS+5 meeting scheduled to be held in New York in June 2006, periodic national reviews were undertaken in late 2005. UNAIDS sent out instructions in August 2005 with a request that governments submit their country reports by 31 December, and ensure that civil society actively participate in the process.

In the past, country reports have rarely included the voices of civil society, especially vulnerable groups such as PLHIV. In many countries, civil society has not yet had the opportunity to participate in the review process to present views on government successes and failures in implementing UNGASS. While the involvement of people living with and affected by HIV has increased at national levels, the challenge is to ensure that the development and implementation of HIV and AIDS programs involve the full participation of the women, men, and young people who are most directly impacted by the disease. As a result, members of civil society are increasingly organizing to maximize opportunities to be involved in national and global reporting, and around the UNGASS review meeting in New York.¹

In consultation with other organizations working on HIV globally, CARE International commissioned a climate survey covering six countries (Cambodia, Kenya, Malawi, Thailand, United Kingdom, and Vietnam) to explore civil society experiences and document lessons learned in the country-level UNGASS 2006 national review processes. The expected outcome of the assessment included:

- ✘ Development of a questionnaire and methodology, which could be modified and used by others for documenting the ongoing process of improving civil society participation.
- ✘ An analysis of civil society participation in the national UNGASS review, especially by organizations of PLHIV and other vulnerable groups.
- ✘ Recommendations for improving participation in future national reviews.

¹ Please reference AIDS Advocacy Alert!, International Council of AIDS Service Organizations (ICASO), Issue No. 2, Dec. 2005; and the Ecumenical Advocacy Alliance for faith-based activities at <http://www.e-alliance.ch/index.jsp>.

Summary of overall findings

The diversity of factors fueling the AIDS epidemic varies in each country studied. There are also differences in the capacities of government structures, national incomes, health systems, funding levels, number of donor and development agencies, and coordination mechanisms. The climate surveys showed that there was no single approach to managing the UNGASS national review process. However, there were common findings across all countries surveyed, which helped to inform the lessons learned and recommendations.

In general, civil society interviewees concluded that they did not fully participate in the process of preparing inputs for the UNGASS reports. Though civil society has been allowed some input with regard to progress reports, **respondents in almost all of the countries felt that their involvement was *ad hoc* and merely representational.**

This was, in most cases, due to lack of capacity, rather than lack of will, on the parts of both civil society and government. In every country surveyed it was stated by both government and civil society respondents that the government authority mandated to lead the national UNGASS review process had **limited capacity**, staffing, and funding. These offices often lacked capacity for overall monitoring and evaluation (M&E) coordination, information gathering, and analysis. Therefore, UNAIDS or other international partners most often funded the consultation process, and in many instances, wrote the report. Some civil society respondents also felt that they had limited capacity to fully engage in the national review process.

The **relevance of UNGASS to some civil society organizations and governments was not clear.** Most of the people involved in the assessment knew of the UNGASS for HIV/AIDS, but there was limited understanding of the Declaration of Commitment or how it specifically related to their countries and/or programs. More than half of the civil society organizations surveyed said they had little or no awareness that a report was being prepared.

The survey found that when governments involved civil society, networks of people living with or affected by HIV/AIDS were almost always represented in the process. However, **stigma**

continues to be a barrier to civil society participation as it prevents PLHIV from being empowered and involved in UNGASS national review responses. This is especially true for the most vulnerable and marginalized populations.

One of the largest obstacles to developing the UNGASS national reports was the **lack of, or weak, national monitoring and evaluation systems.** As was the case in **Cambodia**, this made it very challenging for governments to report the achievements against the UNGASS indicators. Instead, UNGASS reporting was most often managed as a project, which came around every two years. Without the anchor of government support, efforts to harmonize and align the data gathered were not effective. While there were a number of participants involved in the UNGASS reporting and review, in reality processes were often driven by only a few people. The government office responsible for producing the national review did not always share the report with other government offices and civil society organizations providing data.

Recommendations on how to improve civil society involvement

Recommendations were provided by the government and civil society respondents as to how best improve the management of UNGASS national reviews. Several interviewees stressed the need for **building the capacity of government and civil society so the review process could be institutionalized**, and not just managed by individuals. Joint institutional capacity assessments should be supported to determine and identify capacity gaps for managing the UNGASS review. This step is critical since capacities vary greatly among government, the private sector, and civil society organizations. Strengthening civil society coalitions at the national and local levels, especially groups of PLHIV, so they may more effectively interface with local and national government entities would improve the reporting process. Thus for both government and civil society to participate effectively, greater capacity strengthening is required in areas such as advocacy, monitoring, and evaluation.

The assessment findings indicate a strong **need for education about the Declaration of Commitment**, UN processes and their relationship to national AIDS strategies. All countries

reviewed have national AIDS strategies and are working toward one monitoring framework. The relevance of the Declaration could be clarified by showing audiences how the goals have been integrated into national strategies.

Civil society organizations and most of the government respondents interviewed during the assessment were very enthusiastic about participating in the UNGASS process. However, they felt their **participation could have been more meaningful had they been involved much earlier and consistently** throughout the process. This was the case, for example, in **Kenya**, where major Nairobi-based networks contributed parts of the report. To address this issue in **Vietnam**, a mapping exercise or study on the current role and contribution of civil society in HIV/AIDS programming was recommended. This would afford the government a better understanding of what and how civil society can contribute to the national review process.

There is a strong **need for continued political commitment and leadership** at the national level. In cases where there was little or no government commitment or leadership, international partners such as UNAIDS stepped in and managed the processes. This partner support provided important assistance throughout the national process but may have limited local ownership surrounding the UNAGSS report.

The government must work with donors to create a **harmonized approach to monitoring, evaluating, and reporting**. Donors should provide support for M&E capacity strengthening and participatory methods in order to strengthen reporting and partnership between government and civil society based on the **“Three Ones” principles** (one national plan, one national coordinating body, and one national monitoring and evaluation system). Part of this effort could include building or reinforcing intersectoral and sectoral management procedures and structures to improve coordination, data collecting, and review processes. In **Malawi** the UNGASS reporting process has been integrated into the national M&E framework.

All parties need to have enough time to work together and to sufficiently consult before reaching consensus on what to include in the final report.

More time should be allowed for analyzing the information, and producing the final report – jointly owned by all stakeholders. This will **allow enough time for a transparent and participatory review**. Assigning key point persons, even where there is no formal process, will allow access to those who want to participate. Developing clear roles and job descriptions, which include communications or information sharing, is critical. Several respondents commented that the national review process helped to bridge the gap in trust between government and civil society. Promoting more **participatory approaches involving civil society with government** will encourage ownership, sustainable partnerships, and effective responses if those primarily concerned are involved throughout all stages of design, implementation, monitoring, evaluating, and reporting to ensure meaningful participation. In **Thailand**, it was suggested that a national forum for sharing information and the final report would help to build participation and partnership.

Broadening the scope of reporting in developed countries may strengthen national response and more accurately reflect the global response to HIV. In the **United Kingdom**, civil society felt there was a lack of coordination across government agencies. There was particular concern that the Department for International Development (DFID) did not participate in the UK response. The inclusion of development aid would have more accurately reflected UK contributions toward achieving UNGASS commitments.

Finally, **tools exist for engaging civil society organizations, especially PLHIV**. The Declaration of Commitment is one such tool that is being used and can be further strengthened. Two other key frameworks are useful guides for meaningful community involvement. First, the Principle of the *Greater Involvement of People Living with or Affected by HIV/AIDS (GIPA)* has been critical to ethical and effective national responses to the epidemic.² Second, *the Code of Good Practice for NGOs Responding to HIV/AIDS*, which has brought the GIPA Principle several steps forward. These frameworks will also help to inform the **development of effective communication and advocacy strategies**. With the support of donors and other local stakeholders, governments need to arrange opportunities

2 From Principle to Practice: Greater Involvement of People Living with or Affected by HIV/AIDS (GIPA), UNAIDS, 1999.

to explain the benefit of the national UNGASS reporting processes to civil society. Strategies must target specific audiences so that all AIDS stakeholders fully understand the Declaration of Commitment and have regular opportunities to provide feedback. To be effective, the application of any of these tools has to first be understood by civil society and by government.

As we undertake the five-year review of the Declaration and examine what hinders its implementation, this assessment found that the intended beneficiaries of these international commitments are not sufficiently part of the processes that affect them. Without the partnership of this community, the targets of the Declaration of Commitment cannot be met. ■