Local AIDS Councils and the civic role of

LOCAL GOVERNMENT

There is widespread consensus that the severity of the HIV and AIDS epidemic cannot be curbed by the government on its own. In light of this realisation, the South African National AIDS Council (Sanac), the highest-level multisectoral partnership body in South Africa, was established in 2000. Chaired by the Deputy President, its objectives include providing leadership, building consensus around HIV and AIDS policy and strategy matters, promoting intersectoral collaboration and overseeing the overall implementation and review of the National Strategic Plan on HIV and AIDS and Sexually Transmitted Infections. The establishment of Sanac in turn led to the creation of similar structures at provincial, district and local level. Today, many municipalities coordinate metro and local AIDS councils, but experience various difficulties in making the structures function effectively.

This contribution looks into some of the first lessons learnt from the Centre for Municipal Research and Advice project, drawing on experiences of the participating local and metropolitan municipalities and the Governance and AIDS Programme of the Institute for Democracy in South Africa (IDASA), based on its extensive work with those municipalities and with AIDS

councils across the country. As part of the overall pilot project, CMRA has been working with IDASA in strengthening six local and metro AIDS councils: Emalahleni, Buffalo City, Madibeng and Marble Hall local municipalities, and Nelson Mandela Bay and eThekwini metropolitan municipalities.

The mandate of local AIDS councils and the challenges they face

While the structure and composition of metro and local AIDS councils (referred to in this article collectively as LACs) vary across the country according to the local context, the terms of reference are more or less the same, derived from the mandate of the South African National AIDS Council (Sanac):

- to advise the government on policy;
- to advocate for effective involvement of sectors and organisations in the implementation of programmes and strategies;
- to create and strengthen partnerships for an expanded response among all sectors;
- to monitor the implementation of the National Strategic Plan on HIV and AIDS and Sexually Transmitted Infections (NSP) in all sectors of society;
- to mobilise resources for the implementation of AIDS programmes; and
- to recommend appropriate research.

Many of the LACs experience difficulties in the execution of this mandate. Challenges experienced by some of the AIDS councils in the pilot project were not different from those found by several other research, support and training projects across the country and include:

- 1. lack of understanding of the mandate of the LAC;
- 2. confusion around the roles and responsibilities of the different LAC members;

- 3. lack of support from elected councillors and municipal officials:
- 4. lack of an AIDS council coordinator;
- 5. lack of project management skills;
- over-representation of CBOs (community-based organisations) and under-representation of certain other sectors on the council;
- 7. resource shortages, especially in CBOs, and related transport problems that affect participation;
- 8. lack of a culture of accountability: people attending meetings haphazardly and/or coming unprepared.

Furthermore, based on its extensive work with AIDS councils, notably in the Eastern Cape, the Institute for Democracy in South Africa (IDASA) found an additional, more fundamental, challenge faced by many LACs: the government sees itself acting largely as a service provider, while other stakeholders respond largely as clients and consumers, instead of equal partners in the response to HIV and AIDS. This 'service provision' approach is common in public health, but a growing body of research from around the world strongly suggests that it is problematic. A recent publication of the Centers for Disease Control in the United States reveals that the service delivery mindset is not effective either for addressing specific diseases or, most importantly in the long run, for enhancing community strength and resilience.

Some of the challenges identified have been innovatively addressed by the different LACs. Buffalo City Municipality

responded to the issue of time and costs related to transport, notably for the CBOs, by establishing two bodies, one in the city and the other in the rural areas. This has led to more consistent participation by members. The LAC has further provided support to the CBOs by assisting with their registration as non-profit organisations, proposal writing, training and the donation of computers.

In Emalahleni, also in the Eastern Cape, there are advanced plans for establishing ward-based AIDS councils, bringing the structure even closer to the people. In order to address overrepresentation by certain sectors, Nelson Mandela Bay Metropolitan Municipality provided for each sector to nominate one representative to the AIDS council, whilst it also established an intersectoral forum open to all CBOs within the municipal boundaries. This forum in turn nominates one representative to the LAC. Ethekwini, in turn, achieved high multisectoral representation through an intensive process of one-on-one recruitment interviews by the coordinator.

While many LACs experience problems due to the lack of an LAC coordinator, this is not the case in Madibeng Local Municipality. The structure has a full-time coordinator, directly employed by the provincial AIDS council, who is based outside the municipality. The risk with this model is that the local municipality may not be involved closely enough in the LAC. This can be prevented by ensuring political representation in the executive committee of the LAC and the appointment of the mayor as chairperson.

Roles and responsibilities of local government

Political leadership is vital for the LAC to fulfil its mandate, but elected leaders need to think very carefully about the kind of leadership they provide. Without the active involvement of political leaders in the structure, it would be difficult for an LAC's advice on policy matters to reach the agenda of the municipality and that of other government sectors. From another perspective, being close to what happens in the communities, LAC members can provide valuable feedback to the government about the implementation of policies, their effectiveness, specific challenges and possible solutions. Political leaders can further help mobilise municipal resources, such as empty buildings that can be used by CBOs, and external resources. The mayor and councillors can raise awareness of the HIV and AIDS epidemic and act as role models by supporting LAC events in the communities and speaking out on HIV and AIDS. Above all, they can help energise and inspire the broader community to join the fight against HIV and AIDS.

Despite the fact that all LAC members have specific roles and responsibilities, local government has primary responsibility for ensuring that the basics are in place. Aside from convening its AIDS council and providing the secretariat, the local or metropolitan municipality has the following roles and responsibilities:

- ensuring that all necessary municipal departments are represented on the LAC;
- coordinating the HIV and AIDS plans of all municipal departments; and
- integrating the plans of the LAC with other municipal plans.

It is also the mayor's responsibility to chair LAC meetings and delegate the chairing function when she or he is unable to be there. Municipal representatives on the LAC also have responsibilities:

- to bring the perspective and technical expertise of their particular portfolio or department as it relates to HIV and AIDS;
- to identify opportunities to collaborate with citizen groups, councillors and other municipal departments;
- to develop a holistic vision of how to deal with HIV and AIDS in the community, and not see things only from their departmental perspective; and
- to propose policies to the local council, after thorough consultation with the community.

Other stakeholders play a major role based on the expertise and strengths in their specific areas of interest. These include other

government sectors, non-governmental organisations (NGOs), CBOs, the private sector, academic institutions and faith-based organisations. Their inputs differ according to the type of organisation but include:

- making policy recommendations based on their experience;
- sharing resources;
- highlighting the resources in the community that can be harnessed in the fight against HIV and AIDS;
- sharing insight and expertise gained from their work on HIV and AIDS;
- helping to organise the community to unleash the hidden energy and talent of citizens to deal with HIV and AIDS:
- bringing the needs of the community to the attention of the LAC;
- providing information about initiatives to deal with HIV and AIDS in the community;
- providing advice to the LAC on how funds can be distributed;
- disseminating information to the community about the LAC; and
- sharing information with other organisations, particularly regarding access to funding.

The civic role of municipalities

While local government has a clear responsibility to provide basic support to the LAC, such as a secretariat and a coordinator, there is a danger in emphasising the operational requirements and overlooking the partnership and catalytic potential of the LAC, which is at the core of the body's mandate. In many LACs, municipalities perform predominantly the role of service provider to the members and much less that of stakeholder at the same level as the other members. Restricting the role of LAC members to that of recipients of services from the municipality reduces their potential to act as joint problem-solvers and agents of change. In some cases LACs have become more of a networking forum, benefiting mainly the CBO and NGO sector. In other cases there is no municipal political representation in the body. In yet others the structure tends to become over-politicised, with little room for stakeholders such as CBOs and NGOs to share wisdom and to actively contribute to fulfilling the LAC's mandate.

There is therefore a need to build more awareness of the civic role of local government in addition to the service delivery role.

The concept of the civic role of government moves beyond a



focus on building structures, providing services and treating citizens mainly as customers. It is a much more dynamic and democratic concept that sees people, both in government and in communities, as the answer. This different view can help LACs become bodies capable of mobilising institutions, organising communities and developing citizen agency to deal with HIV and AIDS in innovative and collaborative ways.

The establishment of an LAC on its own is not enough. Much time can be spent attempting to understand terms of reference, ensure correct representation and develop efficient administration while accomplishing very little else. Without a powerful and broadly owned vision, no structure can achieve very much. The emphasis needs to be on organising the community, tapping into the energies and talents of citizens, and building people's capacity to be agents of change. Unfortunately, the experience of LACs has shown that local government often has provided limited leadership thus far. But with a stronger vision, local government could play a key role in turning LACs around. This requires a shift in mindset.

In the face of the growing HIV and AIDS epidemic, many in local government may feel the pressure to provide more and better services. Although this response is well-intentioned, it fails to acknowledge that government will never be able to deal with the full extent of the AIDS crisis on its own. The whole of society has to become involved in dealing with the epidemic. Rather than attempting to control the local response to HIV and AIDS, local government can become the catalyst of a 'whole community response'. Instead of the LAC being a bureaucratic coordinating structure or directionless networking forum, it can help to initiate partnerships, and unleash and develop the

capacities of citizens to solve problems together.

During a training workshop with IDASA, the pilot municipalities considered how the terms of reference of the LACs might be fulfilled if local government became a catalyst of multi-stakeholder action on HIV and AIDS. The suggestions below are not exhaustive. They are just some practical ideas of what the LAC and its members can do to fulfil its role, with leadership from local government.

To advise the government on policy

- Canvass the people who are affected by policies.
- \bullet Provide feedback on policy that does not work in implementation.
- Show how AIDS impacts many other policy areas and promote better integration of policies.
- Know the policy process so that interventions are made at the right time.

To advocate for effective involvement of sectors and organisations in the implementation of programmes and strategies and to create and strengthen partnerships for an expanded response among all sectors

- Identify sectors not in the LAC and do face-to-face advocacy to bring in sectors not currently represented.
- Encourage all LAC members to take responsibility for drawing in new sectors, not only the LAC coordinator or chair
- Workshop all LAC members (new and old) on the vision and functions of the LAC.
- Create open forums or 'big groups' on HIV and AIDS, based on ward committees or clinic committees, to get wider participation from the whole community, not just the 'usual' groups.

To monitor the implementation of the National Strategic Plan in all sectors of society

- Show each sector where they can play a role in the NSP.
- Bring monitoring closer to LACs not only at provincial level.
- Plan for monitoring from the beginning set targets and indicators, in line with the municipality's integrated development plan.
- Monitor in order to improve, not simply to prove that "we've done our job".

 Create a culture of accountability based on shared ownership of the AIDS crisis.

To mobilise resources for the implementation of AIDS programmes

- Identify potential partners by doing one-on-one interviews – see every citizen, group or institution as a potential resource.
- Identify helpful skills and expertise among LAC members and other organisations.
- Connect with the private sector go beyond the usual stakeholders.
- When research institutions conduct projects in the community, negotiate with them to build infrastructure and leave equipment when they complete their work.

To recommend appropriate research

- Establish partnerships with local research institutions.
- Use final-year students commission research to fill local information gaps.
- Utilise research and knowledge from various members of the LAC; NGOs often gather useful data, and CBOs have a wealth of hands-on experience.

 Document local experience and empower 'ordinary citizens' to play a role in research in order to build local capacity.

Seeing citizens as resourceful partners and agents of change in the response to the HIV and AIDS epidemic requires a significant shift in mindset by many, both in government and among citizens themselves. Local AIDS councils have the potential to set an example. Considering the role of local government to coordinate and convene the LAC, local government is well placed to initiate and facilitate the process by which all members of the AIDS council contribute, to their full potential, to HIV prevention and impact mitigation.

This article was written by the Centre for Municipal Research and Advice in collaboration with the Governance and AIDS Programme of IDASA, based on the 'Citizens at the Centre' approach to Local AIDS Councils.

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News Flash

HIV, AIDS and human settlements

On 18 and 19 September the Isandla Institute and SA Cities Network hosted the seminar and learning event "Positive Spaces: Sustainable Human Settlements in the context of HIV and AIDS". The event, opened by Professor Dan Smit, adviser to national Minister of Housing Lindiwe Sisulu, was attended by national government and municipal representatives, NGOs and research institutions, and took place in Cape Town. It looked into, among other things, the role of

municipalities in realising sustainable human settlements, the policy and human rights imperatives for integrating HIV and AIDS in sustainable human settlements planning, and the integration of HIV and AIDS into local governance and development. The report of the event, the concept paper and the Isandla Institute's HIV/AIDS and Human Settlements Planning Guide for Municipal Practitioners will soon be available on www.isandla.org.za and www.sacities.net.

SALGA country plan

On 9 July the South African Local Government Association (SALGA) hosted a workshop with the aim of finalising the development of the Country Plan for Local Government on HIV and AIDS. One of the main objectives was to align the plan to government guidelines and frameworks, such as the HIV and AIDS and STI Strategic Plan for South Africa 2007–2011 and the Department of Provincial and Local Government Framework for an Integrated Local Government Response to HIV and AIDS. The workshop was

attended by a variety of stakeholders, including SALGA Social Development Working Group members, mayors and municipal managers, representatives of other government sectors and technical service providers. After the inputs of the delegates have been incorporated, the finalised plan will be submitted to SALGA national executive committee for consideration and endorsement. The presentations can be downloaded from the HIV and AIDS pages of www.salga.net.