

Enhancing Accountability in HIV Programs: Lessons from the Global Fund's First Learning Wave of National Strategy Applications

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The article uses the First Learning Wave (FLW) of the Global Fund's National Strategy Application (NSA) to examine how 'accountability' is described both in the strategic priorities set, and in the mechanisms for assessing achievement against them, in the three National Strategic Plans that were developed for the FLW/NSA (Kenya, Malawi and Rwanda). A three-level framework for accountability is described and used to analyze the experience of the countries in the First Learning Wave of the Global Fund. It addresses two questions: how responsive were the National Strategic Plans (NSP) for AIDS to the notion of accountability, and how did the NSA modality assess accountability. We find that while relatively strong institutional and coordination frameworks are described in these new NSPs, and assessed by the Global Fund, accountability per se is not recognized as an explicit element in strategic planning; rather, it seems to be considered an implicit aspect of 'coordination,' 'financial management,' monitoring and evaluation, and 'participation.' We suggest that accountability frameworks need to be made explicit in NSPs as do processes for managing them. Moreover, assessment frameworks need to make explicit assessments of these provisions.

BACKGROUND

Overseas development assistance (ODA) for health has increased enormously in recent years, along with exceptional investment of political and intellectual capital from both traditional and new, non-traditional players, and increased emphasis on equity, entitlement and empowerment of the population with respect to health. Non-traditional actors such as the Bill & Melinda Gates Foundation and the Global Fund to fight AIDS, TB and Malaria (Global Fund), have brought both very significant independent financial weight, and an important emphasis on participation and the contribution of civil society. These investments have, however, been faced with the stubborn persistence of ill-health and disease. Along with the recent global financial crisis, these developments have generated significant global debate about governance in global (and national) health systems.^{1,2,3,4,5}

The governance narrative throws accountability into fresh focus as it raises fundamental questions about "the roles various organizations should play, the rules by which they play, and who sets those rules."⁶ But rules are only important if there is a way to monitor and establish compliance—namely accountability.

Accountability is a key issue in other aspects of governance too: concern with outcomes and performance is not just about monitoring and evaluation, but about identifying who needs to be responsible for doing something to improve outcomes and performance. Similarly, performance-related funding is not simply about precise accounting, but rather about recipients taking responsibility for ensuring fiduciary accountability and value for money.

In April 2007, the board of the Global Fund requested a review of the Fund's architecture to fully support the financing of a single, national strategic framework through the establishment of a Modified Application Process for Supporting Country Programs, called National Strategy Applications (NSAs). Promoted as the most innovative move since the Fund's creation, the modality aims to address the Fund's "commitment to aid effectiveness principles" and "country requests for streamlined processes."⁷ The NSA's primary characteristic revolves around the assessment of an existing national strategy that is considered to be sufficiently robust to serve as the basis for a funding application in terms of how priorities are set, who sets them, how funds are allocated to those priorities, and how performance and impact can be monitored and assessed—all key aspects of 'accountability.'

In May 2009, following a selection process based on an initial assessment of the national strategy documents by the Global Fund's Technical Review Panel (GF/TRP), three countries—Rwanda, Malawi and Kenya—were invited to submit HIV-focused National Strategy Applications as part of the First Learning Wave (FLW). Rwanda was successful. The applications from Malawi and Kenya were rejected, appealed, and finally the rejections sustained.

To put the three countries in context, all have significant HIV epidemics that have spread widely through their general populations, but are neither the hyper-epidemics of parts of southern Africa, nor the concentrated epidemics of other parts of the world. All have substantial, largely donor derived, resource envelopes.

Table 1: NSA/FLW for HIV—Countries⁸

Country	Prevalence	People living with HIV	Antiretroviral therapy coverage	Main sources of funding (%)
Kenya	7.4% 15-49 years (KAIS 2007)	1 300 000	38%	PEPFAR: 83 Global Fund: 5 Govt: 5.5
Malawi	12% (2007)	809 833	55% (2008)	Global Fund: 44 PEPFAR: 28 Govt: 1
Rwanda	3.0% (DHS, 2005), 4.3% (ANC 2007)	149 000	76%	PEPFAR: 53 Global Fund: 26 Govt: 13

A variety of different structures govern responses in these countries. Malawi has one of the strongest National AIDS Councils in Africa, managing a substantial pool of local and donor funds for HIV. Kenya's National AIDS Control Council has recently emerged from a period of major mis-governance, but is making perhaps the greatest efforts at stakeholder inclusion in the region. In Rwanda, the National AIDS Council is a much weaker body, largely limited in power and scope, overshadowed by a strong health sector and powerful Global Fund architecture. The countries benefited from substantial and varied technical support to develop the National Strategic Plan/National Strategy Application.

PURPOSE AND CONCEPTUAL FRAMEWORK OF THIS PAPER

The three countries revisited their National Strategic Plans (NSPs) and the Global Fund assessed them, as part of the National Strategy Application process—this paper

reflects upon these NSPs and the Global Fund assessments. It specifically reviews what impact the NSA modality is likely to have in the HIV governance architecture at the country level, with particular reference to *accountability*, which we see as a critical but under-elaborated element in health system governance.

Accountability has many dimensions and covers a range of issues and situations. These range from effective stewardship of the public interest in program design;^{9, 10, 11, 12} to effective reporting on program progress by governments;^{13, 14, 15} to civil society tracking of policy and public sector service delivery;¹⁶ to global monitoring of government commitment and compliance to global commitments; and finally, to fiduciary rectitude in use of funds.

Underlying most descriptions of accountability is ‘answerability:’ the idea that someone has to provide information and explanations for action and inaction, and be liable to sanctions for failure to deliver.¹⁷ But accountability is not only about passing judgment or ensuring compliance—it should be a mechanism for learning and reflection aimed at improvement.¹⁸

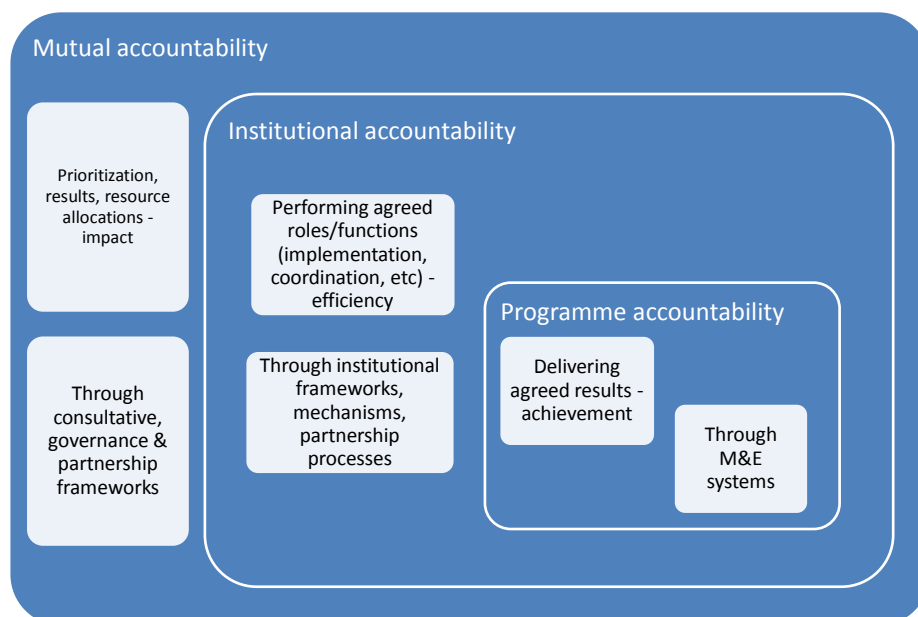
Thus while the term ‘accountability’ is seldom used in the NSPs, and was not explicitly a specific requirement of the Global Fund NSA process, our purpose was to investigate just how far concepts and frameworks for accountability underlay the NSPs and the Fund’s NSA assessments of them. Much is made in the Global Fund’s governance principles and structures of ‘oversight,’ ‘participation,’ and ‘inclusion.’ Equally, ‘performance-related funding’ is fundamental to fund (and increasingly other donor) disbursements.¹⁹ All these, we argue, reflect in effect various forms of *accountability*. We aimed to see how far explicit investigation of these aspects of accountability helped reveal strengths or weaknesses in the NSA FLW experience.

As a framework, in this article we draw on various perspectives to assert three broad levels of, or requirements for, accountability:

- *National, mutual accountability:* where all stakeholders in the national response agree to and accept prioritization, strategic focus, resource allocation, etc, working through partnership mechanisms reflecting their different perspectives, interests, contributions, and roles--what have all stakeholders agreed needs to be done and by whom?
- *Institutional accountability:* where responsibility for institutional response efficiency and effectiveness is specified, based on how well stakeholder institutions and organizations manage, and participate in, coordination frameworks, and fulfill their agreed roles. For example, is the NAC managing coordination effectively; are development partners participating and sharing budgets; are NGOs reporting in M&E systems; are other ministries and NGOs participating in meetings—are all stakeholders doing what they agreed to do?
- *Program accountability:* for results, based upon performance assessments, Monitoring & Evaluation systems, etc. Basically, the need for implementers to be transparently responsible for delivering agreed *program results*—how well are stakeholders doing what they agreed to do?

The following diagram suggests how these levels of accountability are related.

Diagram 1: A framework for accountability



All three of these levels require not only *structures* for accountability, but also *processes* through which the systems inherent in the structures are managed and realized.

The generally accepted vehicles for expressing the architecture for accountability for the national AIDS response are the National Strategic Plans (NSPs). These, theoretically, should describe the national strategic priorities and resource allocations that reflect the national consensus, or shared, *mutual accountability* described at the first level of our framework above. They should specify the *institutional* and organizational roles and frameworks through which this national consensus will be managed and implemented: our second level of accountability. They must also specify the outcomes and outputs for which various implementers are to be accountable, and the monitoring indicators through which such *program accountability* can be established.^{20,21} Any assessment of the 'soundness' of a NSP must, therefore, specifically review how far these levels of accountability are implicit or made explicit in the NSP.

Our specific aim was to reflect on a) how far the NSPs addressed accountability issues; b) how the dimensions of accountability were assessed within the NSA FLW; and c) what accountability-specific strengths and weaknesses of the NSPs were missed or misinterpreted within this process.

METHODOLOGY AND LIMITATIONS

The paper draws on the rich documentation surrounding the NSA FLW and associated aspects of governance and strategic planning. Using the accountability framework described above, we conducted critical analyses of a range of documentation, review and studies.

First, a set of primary documentation was reviewed: the three NSPs themselves,^{22,23,24} the 'assessments' by the Technical Review Panel (TRP) of the Global Fund^{25,26,27} and the NSAs.^{28,29,30}

A secondary set of documentation reviewed described the experience of the

NSA FLW, which included three foundation country case studies documenting the country experience in the NSA First Learning Wave had been prepared in-country by local consultants, based on extensive in-country interviews and discussions and validated through stakeholder meetings.^{31,32,33} On the basis of country documentation and stakeholder consultation and feedback, a comprehensive study had been conducted by UNAIDS.³⁴ This had attempted to determine what kind of planning, results, and accountability framework the NSP/NSA provided; and to identify the strengths and weaknesses of the governance framework within which the NSP/NSA was developed.

Third, two further reports of the process were reviewed: a 'learning' report commissioned by the Global Fund itself as a study of country stakeholder experience with the NSA FLW, prepared by McKinsey,³⁵ and a 'lessons learned' report on the NSA FLW prepared by the TRP itself.³⁶

Lastly, our review was informed by earlier assessments of NSPs in the same region, as well as wider discussion of some of the governance issues surrounding NSPs for AIDS.^{37,38,39,40}

An important element of our analysis was the involvement of the authors, particularly the national program managers who have insights not available to others, and bring a depth of real experience to the analysis.

Our analysis is based exclusively on the three sub-Saharan countries that submitted an NSA for HIV. The small sample size limits the robustness of our conclusions, as does the fact that the FLW was accepted as a hurried, preliminary approach to the 'end-state' NSA. Although only one of the NSAs was successful, this should not limit the validity of the analysis: the rejection of the other two was neither related to the NSPs nor their assessment, but rather to issues related specifically to the NSA grant applications.

This assessment was not quantitative, hence explicit quantification and generalization of responses was not possible. The analysis used the framework of three kinds of accountability described above, and attempted to see how far these had been addressed in this range of documentation.

The analysis is further limited in that it is an assessment of *potential* accountability—accountability frameworks and processes as described in theory—not accountability in action. How these will work out in practice is beyond the scope of this article.

RESULTS

We first analyze the three NSPs themselves before turning to the assessment of the NSPs.

How far have the NSPs addressed accountability issues?

The three NSPs have made very significant progress in comparison to earlier plans in the region⁴¹ in providing clear and explicit descriptions of a variety of frameworks, mechanisms, and processes through which accountability can be, and in some instances already has been, strengthened. These are primarily institutional frameworks showing responsibility channels and coordination forums through which stakeholders' individual and mutual roles can be agreed, and more explicit results matrices and M&E systems through which performance can be established. The various dimensions of *accountability* are not, however, explicitly described in particular detail in any of the plans.

The elements of *mutual accountability* are largely derived from the coordination functions of the National AIDS Commissions; thus, all three NSPs reflect a wide consensus in terms of prioritization and resource allocation. This is a partial reflection of the kind of mutual accountability described in our framework.

Institutionally, while all three NSPs make considerable efforts to describe the *frameworks, systems, and structures* through which such accountability can be achieved, none is particularly forthcoming on the *processes* through which these are established, managed, supported, and operated—which, in our imperfect world, are where the gaps between intention and execution usually occur.

Similarly, while there are strong results frameworks, M&E and financial management systems and frameworks are described, but their use for accountability is largely implicit: data will be collected and analyzed, but how will performance data be used to identify and assign accountabilities?

How far were the different dimensions of accountability assessed within the NSA FLW?

A key element of the NSA is a process through which the country's NSP is 'assessed' for 'soundness' as the basis for a substantial grant application.^{42, 43} In the FLW this assessment was conducted by the Global Fund based on a modification of the set of 'attributes' for 'soundness' developed by the International Health Partnership Plus (IHP+) for its 'Joint Assessment of National Strategies.'⁴⁴ 'Accountability' *per se* is barely mentioned in these attributes and is not distinguished in any categorical sense. We reviewed the IHP+ attributes and were able to relate six of these to our three levels:

Table 2: Relationship between IHP+ attributes and accountability

IHP+ attribute	Accountability
Attribute 5: Multi-stakeholder involvement	Related to establishing a basis for <i>mutual accountability</i> for policy, prioritization, resource allocation, etc.
Attribute 10: Financial management system	Related to fiduciary responsibility and <i>institutional accountability</i>
Attribute 16: Governance, management, and coordination mechanisms	Relating to <i>institutional frameworks</i> through which <i>accountability can be managed</i> .
Attribute 17: Monitoring and evaluation	Related to <i>accountability for program performance</i>
Attribute 20: Periodic performance reviews	Related to <i>accountability for program performance</i> .
Attribute 21: M&E and decision making	Related to <i>accountability for program performance</i>

Although the Global Fund assessment did not specifically look for 'accountability', on the basis of the comparison of attributes and accountability above, we classified the assessments against our typology.

The assessments for Rwanda noted 'strong multi-stakeholder involvement,' 'a

logical series of analytical and consensus-building steps ... which involved all stakeholders.’ For Kenya, they found ‘systematic and rigorous involvement of national stakeholders in the government, and the private, voluntary, faith-based and commercial sectors, and in close consultation with international agencies.’ For Malawi, they saw ‘wide participation’ in the development of the National Framework. These can all be classified as reflecting good *mutual accountability*.

With regard to *institutional accountability*, the assessments recognized the descriptions in the NSPs of institutional frameworks for implementation, governance, financial flows, and decision-making but called for further clarifications and how they would work in practice. No mention of ‘accountability’ within the context of these frameworks was made.

With regard to *program accountability* the assessments tended to focus on the descriptions of the M&E systems as independent elements of the NSPs, and did not explicitly link M&E to the results frameworks and accountability for performance.

As with the NSPs, the assessments took the provision for accountability largely as a derived attribute within the assessment framework, not an attribute in itself. The NSA/TRP assessments clearly identified areas of significant weaknesses, but without indicating why these were weaknesses, or what the implications of the weaknesses were—particularly with respect to accountability. In the criticisms of the M&E systems and their use, for example, the assessments did not make explicit the critical issue that such weaknesses will impact very heavily on actual *accountability* for performance.

DISCUSSION

Our analysis (and the Global Fund’s NSA assessments) has suggested strengths and weaknesses at the three levels of accountability. But how far during the FLW-NSA process were the strengths and weaknesses successfully identified to ensure the ‘soundness’ of accountability within the NSPs and therefore the NSAs?

Mutual Accountability

Within the context of the NSAs, the aspects of ownership and governance of national strategies, participation of stakeholders in their development, and their use for resource allocation—corresponding to our *mutual accountability*, are highlighted.

Global Fund governance mechanisms, primarily the Country Coordinating Mechanism (CCM), provide an innovative approach to *country* governance and accountability, as opposed to strictly *state* governance and accountability. They remain essentially uncharted territory, but they do attempt to establish what we have called ‘mutual accountability,’ that is, consensus among various stakeholders about what money should be spent on. National AIDS Councils are charged to develop National Strategic Plans: this responsibility, and these plans, are legitimized by the National AIDS Council’s institutional mandate—given by the state usually through Executive or Parliamentary processes. National AIDS Councils and their National Strategic Plans thus have state legitimacy and ‘ownership’—a different perspective on ‘mutual accountability.’

Recently, however, many National AIDS Councils, through such mechanisms as Partnership Forums, Advisory Boards, or Inter-Agency Coordination Councils have been trying to extend their state-based ownership and ‘mutual accountability’ towards the more inclusive mutual accountability that the Global Fund Country

Coordinating Mechanisms aim for.

But the Country Coordinating Mechanisms are accountable only for Global Fund monies; stakeholders who do not participate in, benefit from, or need Global Fund money need not accord the CCM any relevance or legitimacy beyond their oversight of Global Fund-funded activities. Only the NSP provides a framework for *all* funding. A fully inclusive national response will therefore acquire the largest amount of ‘mutual accountability’ when it is enshrined in the National Strategic Plan and draws on the kind of ‘ownership’ that characterizes CCMs. State actors must participate in this accountability by virtue of the state’s ‘ownership’ of the NSP; non-state actors have a choice, depending on their need for inclusion and their acceptance of mutual accountability. Civil society in many countries has recognized this, and tends to see the National Strategy Application as the best of both worlds--based on the NSP, but managed by the CCM. They see an opportunity for greater participation, and thus greater mutual accountability, which is reflected in their greater involvement in the National Strategic Plan.

In Kenya and Malawi the dynamics of mutual accountability are well-established at the national level through the strategic planning process; in Rwanda they are more ephemeral. All seem to be delivering increasing levels of accountability for policy and priority choices—whether to allocate resources to programs for most at risk populations rather than to ‘youth’ in general, to allow condom program in prisons, or to scale up ART.

Institutional Accountability

Institutional accountability frameworks are described in each of the three NSPs, although the NSA/TRP assessments requested further clarification in all three countries. These frameworks are, however, often extremely difficult to untangle and assess—particularly with regard to multi-sectoral AIDS strategic planning as they tend to cut across traditional sectoral frameworks; and seldom describe actual ‘accountability’ roles clearly. Yet identification of accountability is essential for establishing responsibility for the effectiveness and efficiency of institutional performance: if implementers, ministries, and institutions do not function within agreed parameters, or duplicate each other, leave strategic gaps, or fail to deliver, how are they held accountable? Who is responsible for pulling them up? On paper, these are part of the ‘coordination’ and ‘oversight’ roles of institutions such as NACs and Country Coordinating Mechanisms (CCM)—and the IHP+ attributes give useful suggestions on how to assess them. While the NSA/TRP assessments of the NSPs frequently called for clarifications in this area, they did not specifically identify the depth, scope, or scale of the problems identified.

Typically, weaknesses seen in the institutional frameworks are:

- Lack of clarity in hierarchical structures that confuse accountability. In both Kenya and Malawi, under the new NSPs, the National AIDS Control Commission is answerable to ‘two masters’—its Board and its ‘parent ministry.’
- Lack of clarity in how institutional frameworks function in practice, thus obfuscating accountability. In Rwanda the NSA/TRP assessment specifically required such clarification.
- Lack of mechanisms/processes for identifying and managing accountability: nowhere in any of the NSPs was there a statement of how the NAC can hold

institutions accountable—‘name and shame,’ ‘turn off the tap,’ table in Parliament, etc.

In practice institutions often fail to function effectively—this gives rise to the perennial debate about how much authority is required to coordinate and establish accountability. In the absence of clear descriptions of institutional accountability, confusion too easily arises between coordination, authority, control, and identifying and attributing accountability.

The three NSPs do reflect a significant step forward in trying to address these problems. Unfortunately, it is a reality of the political and institutional context in many countries that such anomalies exist across a wide spectrum of institutional and political venues and frameworks.

Program Accountability

Program accountability for results, based upon performance assessment, M&E systems, annual reviews, etc. requires three essentials: a robust results framework so that what constitutes performance can be identified; robust M&E system, so that data about performance can be collected; and links between these systems and the institutional frameworks described above so that performance data drives decision-making and financial flows. These are accountability frameworks within which specific institutional and organizational accountabilities can be identified.

The program accountability level is probably the strongest part of the experience under review. The IHP+ attributes specifically call for a “logical framework or results based framework;” and two of the NSPs had made significant progress in developing robust results-based management (RBM) frameworks. All the NSPs recognize the need for effective M&E systems, which were assessed, though largely as data systems. Unfortunately, in practice, collecting reliable data remains a challenge in most countries. Using the data to assess achievement and attribution, and make decisions, represents an even greater challenge—as countries struggling with reporting on Global Fund grants have found.

While strong M&E data collection systems are being put in place, developing strong results frameworks that give them meaning, and finding the accountability mechanisms and processes to use the data remain an accountability issue.

CONCLUSIONS

This analysis has been exclusively based upon documentation of theoretical frameworks. As noted earlier, it is primarily about the *potential* for accountability—the presence or otherwise of structures and processes for accountability, rather than the delivery of accountability in practice. Nonetheless, the analysis suggests a number of lessons that can be learned with respect to strengthening frameworks for accountability in HIV governance.

Relatively strong institutional and coordination *frameworks and structures* are being spelled out in the NSPs that can be used for accountability: NSPs are getting better, but this improvement requires the kind of stimulus the NSA can give. The NSA assessments specifically review and highlight, the strengths and weaknesses of these frameworks—but do not explicitly link them with accountability. Accountability *per se* is not recognized as an explicit element in strategic planning; it seems to be considered rather as an implicit part of ‘coordination,’ ‘financial management,’ M&E, and ‘participation.’ This is a pity, as accountability, in various

forms, is becoming recognized as a vital aspect of effective planning and programming in its own right.

Indeed, a number of direct governance issues arising around national responses to AIDS seem to rely on more explicit identification and description of accountability at all levels. We suggest that our three-level framework is a useful way of starting the process of making accountability more explicit as an element in strategic planning.

While mutual accountability for overall national stakeholder consensus on strategic prioritization and resource allocation seems to be developing well, the actual mechanisms through which it is realized are still confusing. Two different, and largely inconsistent models currently exist—the state-led NACs and NSPs and the CCM-lead NSAs and other Global Fund grants. These models are directed at ‘stakeholder participation’ and ‘oversight’ and legitimacy; the expected outcome of these terms—answerability—tends to be under-emphasized. As the NSA becomes the ‘preferred option’ for Global Fund grant making,⁴⁵ these models will need to be reconciled, and precise and explicit mechanisms for mutual accountability established.

Similarly, for institutional accountability, if the sterile coordination versus authority debate is to be resolved, greater attention is needed to what institutional accountability precisely entails, and how it is to be achieved. NSPs need not only to describe the structures for accountability at this level, but also to spell out precise levels of accountability, with reference to results and indicators, and just how the accountability mechanisms are to work.

For program or performance accountability, a great deal has been done to strengthen results and M&E frameworks as a good basis for establishing what has been promised and what has then actually been implemented. But again, the precise mechanisms and processes through which accountability for performance is attributed and implementers held responsible are usually still vague. As the Global Fund/TRP noted in one of the NSPs—data collection is all very well, but how do data get used for decision-making?

Managing for accountability—the *processes* of accountability—tends not to be overtly recognized as an important function in the stewardship of NSPs. Recent work in UNAIDS to identify ‘core functions’ of the stewardship of national responses is a step in this direction;⁴⁶ though ‘managing accountability’ needs to be identified as a core function, and the precise nature and components of this function need to be explicated.

A number of the key elements needed in creating the kinds of accountability frameworks, structures, mechanisms, and processes we call for can be identified from this NSA case study.

- Frameworks and processes for transparent consultation, consensus-building, and prioritization that balance the demands of different stakeholders, but enjoy legitimacy with all. Building on the NAC and CCM models, much is being achieved, but various inconsistencies remain.
- Precise delineation of institutional frameworks, roles and responsibilities, and mechanisms across all stakeholders—and how these can be used to identify and attribute accountability.
- Robust, linked results and M&E frameworks that provide clear and attributable responsibility for program implementation. Again, considerable

work progress has been made in this respect, but much more needs to be done to develop effective results frameworks.

- Clear linkages are required between these three elements, so that the results to be achieved are explicitly agreed upon by all stakeholders, the roles and responsibilities in achieving them clear, the monitoring and measuring of achievement of results effective, and accountability at all levels attributable.

All these need to be made explicit in NSPs as the definitive, country-owned statement for accountability. Finally, the assessment frameworks used to determine the 'soundness' of NSPs, such as the 'Joint Assessment' that is a critical element in the NSA process, need to make more explicit assessments of such accountability provisions.

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