Support to Mainstreaming AIDS in Development

UNAIDS Secretariat
Strategy Note and Action Framework
2004-2005
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1. Introduction

Twenty years into the pandemic, there is now ample evidence for the complex linkages between AIDS and development: development gaps increase people’s susceptibility to HIV transmission and their vulnerability to the impact of AIDS; inversely, the epidemic itself hampers or even reverses development progress so as to pose a major obstacle to the achievement of the Millennium Development Goals.

The growing understanding of this two-way relationship between AIDS and development has led to the insight that, in addition to developing programmes that specifically address AIDS, there is a need to strengthen the way in which existing development programmes address both the causes and effects of the epidemic in each country-specific setting. The process through which to achieve this is called ‘Mainstreaming AIDS’.

In recognition of this, the 2001 United Nations General Assembly Special Session Declaration of Commitment on HIV/AIDS requires countries to integrate their AIDS response into the national development process, including poverty reduction strategies, budgeting instruments and sectoral programmes.

Since then, in many countries efforts have been made by government as well as non-governmental actors to mainstream AIDS in different sectors and at different levels, with the support of several international partners, including UNAIDS.

However, there still appears to be a lack of consensus on the meaning and importance of mainstreaming AIDS. Furthermore, most experiences to date are of insufficient scale to achieve the system-wide effects needed to produce a sustained impact on causes and consequences of AIDS.

In response to this, the UNAIDS Programme Coordinating Board instructed the UNAIDS Secretariat in 2003 to assist countries in developing their capacity to measure the impact of AIDS, as well as to incorporate AIDS into major development instruments and sectoral programmes. This instruction has been translated into a Key Result in the Secretariat’s Biennial Action Framework: “HIV/AIDS is integrated and mainstreamed into relevant development frameworks”.

Objectives of This Strategy Note

- To promote a common understanding of the concept of mainstreaming (sections 2 and 3);
- To summarize the lessons learned from documented current practice, including the main challenges to effectively mainstreaming AIDS (section 4); and
- To propose the UNAIDS Secretariat’s Action Framework to strengthen support to mainstreaming processes in partner countries (section 5).
2. The Rationale for Mainstreaming AIDS in Development

2.1. Why Mainstream AIDS?

- Mainstreaming aims at improving development practice so as to enhance its contribution to the response to AIDS:
  - By having development actors attend to both the immediate and the underlying determinants of people’s susceptibility to HIV infection:
    
    HIV spreads “along the fault lines of failing development”, such as poverty, gender inequality, poor social services. Mainstreaming enables development actors to strengthen the way in which they help reduce the susceptibility to HIV infection of the people they serve. This implies that they also try to identify and minimize unintended negative effects of their own work, such as increasing gender inequality.
  
  - By having development actors take into account the impact of AIDS and adjust their work accordingly:
    
    AIDS disproportionately hits the most vulnerable groups, and affects the capacity of development actors themselves: it thus deepens existing development problems. Through the process of mainstreaming, development actors analyse and address the impact of AIDS both on their own capacity and on the people they serve, now and in the future.

- Conversely, mainstreaming is about gradually incorporating national responses into national development processes in order to ultimately equip countries with the capacity to reverse and contain the epidemic.

  Through the process of mainstreaming, national responses are being institutionalized within national development instruments and processes: this will ensure the sustainability of AIDS programmes and strengthen national coping capacity, thus allowing them to achieve lasting results.

2.2. Mainstreaming and the National Response

- Considering the above, mainstreaming and national responses are inseparable:

  - While all development actors, including international development agencies, need to mainstream AIDS in their work, it is not possible for any of them to respond to the complexity of the causes and effects of AIDS by itself. The intended system-wide impact of mainstreaming can only be achieved if the respective efforts complement and reinforce each other. In order for this to occur, mainstreaming efforts need to be coordinated within the framework of a harmonized multi-sectoral national response, as described by the “Three Ones” principle. Within this framework, synergies between the different contributions, including international funding and technical support, will be created.

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1 One agreed National HIV/AIDS Action Framework, One National AIDS Coordinating Authority, One agreed country-level Monitoring and Evaluation system
- Inversely, for national responses to achieve their ultimate goal of containing the epidemic, they need to address the development-related causes and effects which fuel it through effective mainstreaming processes. Indeed, while HIV prevention work is necessary to inform and motivate people to protect themselves, it cannot overcome deeply-rooted societal causes of susceptibility; similarly, treatment, care and support programmes can reduce the impact of AIDS on affected households, but cannot address the underlying reasons for their vulnerability.

• From the above, it is clear that putting in place “specific” AIDS programmes and mainstreaming AIDS in development is not a matter of “either/or”. One of the facets of the exceptionality of AIDS is indeed its character of long-term emergency, which commands a response representing a continuum:
  - From a response attempting immediate relief, addressing the vital challenges posed by AIDS, whether by their scale and/or their urgency;
  - To a more in-depth developmental response, addressing the societal factors of susceptibility and vulnerability.

2.3. The Scope of Mainstreaming AIDS

• This Strategy Note reviews the concept and basic principles for effective mainstreaming; however, as with national responses in general, their operationalization will vary per country context as determined by:
  - The size, trend, and stage of the epidemic;
  - The main factors of susceptibility, vulnerability and resilience, including culture and tradition;
  - The capacity and performance of governance institutions and development actors; and
  - The range of stakeholders involved.

• Obviously, the need for mainstreaming is most easily acknowledged in highly affected countries because of the visible impact of the epidemic. At the same time though, it is precisely in these contexts that the capacity to put in place developmental responses to AIDS is hampered by the epidemic itself.

• Inversely, in contexts where the epidemic is less visible, the rationale for mainstreaming is often less apparent to decision-makers. There is, however, a clear case for mainstreaming AIDS in such settings:
  - Even where AIDS is in itself still less of a problem, there are often clear linkages between local factors affecting susceptibility and vulnerability to infection, and other, more visible development problems, such as injecting drug use, poor services for young people, stigmatization of homosexuality, or broader issues such as gender inequality, poverty and migration.
  - In such contexts, AIDS draws attention to related development issues that are often insufficiently recognized and addressed, and need to be tackled regardless of AIDS.
  - Beyond this, the history of AIDS in highly affected countries provides a clear rationale for pre-emptive action to reduce susceptibility and vulnerability to infection at a time when national capacity is not yet crippled by the epidemic.
3. The Concept of Mainstreaming

3.1. Working Definition of Mainstreaming AIDS

- We propose the following working definition:

“Mainstreaming AIDS is a process that enables development actors to address the causes and effects of AIDS in an effective and sustained manner, both through their usual work and within their workplace.”

- By ‘development actors’ we mean all the people and institutions involved in development, including all sectors and levels of government, the business sector, civil society, and international agencies.

- By ‘usual work’ we mean the work that development actors are supposed to do as set forth by their mandate, mission or business interests.

3.2. Mainstreaming Domains

- The working definition distinguishes two domains for mainstreaming AIDS:

  - The **external domain** is the organization’s mandate and usual work, including the people it serves;

  - The **internal domain** concerns the organization’s workplace, including its resources, mainly the employees, and internal procedures.

While, as a rule, both domains need to be addressed, their relative importance will depend on the concrete context. In current practice, internal mainstreaming is often considered as a productive “entry gate” to mainstreaming in the external domain.

- In each domain, the mainstreaming process will be guided by three basic questions:

  - How does AIDS affect our organization and our work, both now and in the future?

  - How may our work mitigate or aggravate susceptibility to HIV infection and vulnerability to the impacts of AIDS?

  - Where does our comparative advantage lie in responding to those effects?
### 3.3. Levels of Mainstreaming

As stated in Section 2, mainstreaming needs to involve all relevant development actors at the respective levels in order to effectively impact on the course of the epidemic. The table below gives an overview of some major instruments and institutions:

<table>
<thead>
<tr>
<th>Level</th>
<th>Instruments</th>
<th>Organizations and Institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global and Regional</td>
<td>United Nations General Assembly Special Session on HIV/AIDS, New Partnership for African Development</td>
<td>UN and other international development agencies</td>
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<tr>
<td></td>
<td></td>
<td>Regional development institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Multinational companies</td>
</tr>
<tr>
<td>National</td>
<td>Poverty Reduction Strategy Paper, Highly Indebted Poor Countries Initiative</td>
<td>Ministries of Finance and Planning, Justice, Decentralization, Defence</td>
</tr>
<tr>
<td></td>
<td>National Development Plans, Medium Term Expenditure Framework</td>
<td>Large NGOs including faith-based organizations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>National employers and labour organizations</td>
</tr>
<tr>
<td>Sectoral</td>
<td>Sector-wide approaches and other sectoral programmes</td>
<td>Ministries, private companies and civil society organizations working in the respective sectors (health, education, women, youth, labour, rural development &amp; agriculture, industry, mining, transport, infrastructure, and others)</td>
</tr>
<tr>
<td>Sub-national</td>
<td>Development projects</td>
<td>Local government (towns, districts)</td>
</tr>
<tr>
<td></td>
<td>Local responses</td>
<td>Small companies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Local NGOs</td>
</tr>
</tbody>
</table>

### 3.4. The Continuum of Responding to AIDS

As outlined in Section 2, an effective national response should cover a continuum of complementary interventions. As current experience shows, the respective components of such a continuum are not always well understood, often because of confusion in the terminology used. We propose the following table for clarification:

<table>
<thead>
<tr>
<th>Term</th>
<th>Focus</th>
<th>Scope</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vertical AIDS work</td>
<td>Addressing the behavioural and medical aspects of AIDS</td>
<td>Specific AIDS work: prevention of HIV transmission, voluntary counselling and testing, treatment, care and support</td>
<td>A stand-alone programme on behalf of sex workers</td>
</tr>
<tr>
<td>Add-on AIDS work</td>
<td>Addressing the behavioural and medical aspects of AIDS</td>
<td></td>
<td>An ad hoc prevention campaign in a private company</td>
</tr>
<tr>
<td>Integrated AIDS work</td>
<td>Addressing the behavioural and medical aspects of AIDS</td>
<td></td>
<td>Antiretroviral therapy integrated in a primary health care package; Sex education curricula in schools</td>
</tr>
<tr>
<td>Mainstreaming AIDS</td>
<td>Addressing the causes and effects of HIV and AIDS</td>
<td>Adapting usual work to address factors of AIDS susceptibility and vulnerability</td>
<td>A livelihoods project which adjusts its programme to better respond to the needs of AIDS-affected households</td>
</tr>
</tbody>
</table>
4. Lessons Learned from Current Experience

The UNAIDS Secretariat recently undertook a literature review of a sample of documented mainstreaming experiences and tools, as well as informal consultations with partners. Below, we summarize some general guidelines underpinning effective mainstreaming processes, as well as the main challenges involved in implementing them.

• **Shared Understanding**

There persists a lack of clarity and consensus about the meaning and practice of mainstreaming, which hampers take-up and implementation. This is linked to the still common misconception that tackling AIDS is limited to specific AIDS work reserved to specialists, rather than embracing a wide range of responses involving all development actors.

Hence, it is critical that all actors involved develop a shared understanding of what AIDS means to their work, and what they are trying to achieve through mainstreaming. The process will be undermined if, for example, actors have stigmatizing attitudes, don’t understand how AIDS relates to their mandate, or see mainstreaming as adding-on specific AIDS work.

• **Learning for Mainstreaming**

In order to build such shared understanding, an organization must assess or at least estimate how AIDS may affect its internal and external domains, and inversely, how the organization and its work may influence the susceptibility and vulnerability of its staff and the people it serves. This learning exercise should include in particular the experiences, needs, and capacities of those who are living with HIV infection and AIDS.

In practice, a lack of reliable data on the determinants and impact of AIDS is often constraining mainstreaming practitioners to rely on less compelling estimates and scenarios. However, this lack of data is often compounded by insufficient involvement of people living with HIV infection and AIDS.

• **Mainstreaming is a Process**

Mainstreaming essentially involves a change process that challenges an organization’s capacity to adjust and improve its performance. Essential factors for a sustained and effective process include: ongoing commitment from leadership and involvement of all levels; adequate technical support to facilitate the process and develop capacity; mobilization of additional resources, including funding; and on-going learning.

To support this process, organizations often nominate focal points and task teams or create AIDS units. In practice, these focal points or units often lack the time and support to be effective. Adequate technical assistance is often hard to access, and tools are of limited use unless they are slotted into a process of developing capacity and implementing change. In highly affected nations, these problems are compounded by the fact that AIDS is reducing the overall capacity and performance of many institutions.

• **Coordination and Collaboration Based on Comparative Advantage**

As stated above, no single organization can address the causes and effects of AIDS comprehensively; instead, each one must identify its comparative advantage in doing so. To cover areas outside of their expertise, organizations need to form complementary partnerships: this will often involve an unprecedented “opening” of the organization towards its environment, e.g. private business and NGOs working with each other.
In practice, this need to coordinate and collaborate proves to be a challenge at all levels: at the national level, between actors from different levels and sectors, but even between levels and departments within the same sector or organization.

- **Learning about Mainstreaming**

Mainstreaming AIDS in development is a complex process involving a large number of actors and levels, and often exploring uncharted terrain. It is therefore important to put in place mechanisms for “shared learning by doing”, including the need for all actors to monitor and evaluate their mainstreaming efforts, and to document and share their experiences.

Mainstreaming AIDS aims at producing system-wide effects, progress is likely to be gradual and not easily measurable in the short term. Hence, as most documented experiences are fairly recent, there is as yet little evidence on the outcomes and sustainability of mainstreaming processes.

5. **The UNAIDS Secretariat’s Action Framework to Support Mainstreaming AIDS in Development**

- **Strategic Considerations Underpinning the Action Framework**

  - As stated in the Introduction, UNAIDS has been instructed by the Programme Coordination Board to step up its support to mainstreaming processes in countries. In implementing this instruction, the Secretariat intends to build upon and complement the considerable body of experience which has been gathered in this area by several development actors, including most UNAIDS Cosponsors.

  - Also, in line with its general mandate as coordinator of the Global Response, the UNAIDS Secretariat Action Framework aims at systematizing the provision of adequate technical support to mainstreaming processes in partner countries by:

    - Promoting a broad consensus on the concept and rationale of mainstreaming;
    - Facilitating interagency coordination based on respective comparative advantages;
    - Identifying, assessing and completing technical resources in support of mainstreaming processes, and making them accessible to country partners;
    - Facilitating the provision of adequate technical support to mainstreaming processes in countries, including via the Technical Support Facilities and South-South cooperation;
    - Documenting and sharing good practices and lessons learned.

  - For practical purposes, the Action Framework will be rolled out along three interrelated yet parallel tracks:

    - Promoting a broad consensus on the concept and its importance as an essential dimension of effective AIDS Responses;
    - Making adequate technical support to mainstreaming AIDS in national development instruments accessible to country partners (National Development Plans; Poverty Reduction Strategy Paper and Highly Indebted Poor Country processes);
    - Making adequate technical support to mainstreaming AIDS in development sectors and at the sub-national level accessible to country partners.
Overview of planned activities:

<table>
<thead>
<tr>
<th>Planned Activity</th>
<th>Timeline</th>
<th>Responsible Party</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Promoting consensus on the concept and rationale of mainstreaming AIDS</td>
<td></td>
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<tr>
<td>1.1. Production and dissemination of the UNAIDS Secretariat Strategy Note</td>
<td>July 2004</td>
<td>UNAIDS-CRD/SSD</td>
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<tr>
<td>and Action Framework on Mainstreaming AIDS</td>
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<td>1.2. Organization of a high-level Roundtable at the Bangkok International AIDS</td>
<td>July 2004</td>
<td>UNAIDS Secretariat and GTZ</td>
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<tr>
<td>Conference</td>
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<tr>
<td>1.3. Publication of a “Consensus Paper for Joint Action”</td>
<td>October 2004</td>
<td>UNAIDS and Partners</td>
</tr>
<tr>
<td>2. Making adequate technical support to mainstreaming AIDS accessible to country partners</td>
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<tr>
<td>2.1. Mainstreaming AIDS in development instruments at the national level</td>
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<tr>
<td>2.1.1. Assessment of documented experiences</td>
<td></td>
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<tr>
<td>- Identification of good practices, lessons learnt and remaining gaps, as well as</td>
<td>4th Q. 2004</td>
<td>UNAIDS Secretariat and Partners</td>
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<tr>
<td>of sources of technical support</td>
<td>1st - 2nd Q. 2005</td>
<td>UNAIDS Secretariat and Partners</td>
</tr>
<tr>
<td>- Based on this assessment, development of additional technical resources as per</td>
<td>1st – 2nd Q. 2005</td>
<td>UNAIDS Secretariat and Partners</td>
</tr>
<tr>
<td>established need: overview of key strategies, guidelines, training module, roster</td>
<td></td>
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<tr>
<td>of experts, etc.</td>
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<tr>
<td>- Dissemination of technical resources identified and developed</td>
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<tr>
<td>2.1.2. Facilitation of technical support to mainstreaming AIDS in national</td>
<td>From 2005</td>
<td>UNAIDS Secretariat and Partners</td>
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<tr>
<td>development instruments, including through Technical Support Facilities and South-</td>
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<tr>
<td>South Cooperation</td>
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<tr>
<td>2.1.3. Support to the documentation and dissemination of emerging good practices</td>
<td>From 2005</td>
<td>UNAIDS Secretariat and Partners</td>
</tr>
<tr>
<td>2.2. Mainstreaming AIDS at the sectoral and sub-national levels</td>
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<tr>
<td>2.2.1. Assessment of documented experiences among:</td>
<td>4th Q. 2004 – 1st Q. 2005</td>
<td>UNAIDS Secretariat</td>
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<tr>
<td>o Major development agencies</td>
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<td>o Agencies providing technical support</td>
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<tr>
<td>o Partner countries (on a sub-regional basis)</td>
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<tr>
<td>- Identification of good practices, lessons learnt &amp; remaining gaps, as well as</td>
<td>1st Q. 2005</td>
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<td>of experts, etc.</td>
<td></td>
<td></td>
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<tr>
<td>- Dissemination of technical resources identified and developed in various</td>
<td>1st - 2nd Q. 2005</td>
<td>UNAIDS Secretariat and regional partners</td>
</tr>
<tr>
<td>formats (database, print, CD-ROM, etc.)</td>
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<tr>
<td>2.2.2. Facilitation of technical support to mainstreaming at the sectoral and</td>
<td>From mid-2005</td>
<td>UNAIDS Secretariat and regional partners</td>
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<tr>
<td>sub-national levels in countries, including through Technical Support Facilities</td>
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<td>and South-South Cooperation</td>
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<tr>
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<td>From mid-2005</td>
<td>UNAIDS Secretariat and regional partners</td>
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</tbody>
</table>
Sources


UNDG (2003): An Assessment of the Role and Experiences of UN Agencies in Poverty Reduction Strategy Papers

UNDG (2003): Guidance Note: UN Country Team Engagement in PRSPs


UNDP (2002): Mainstreaming of HIV and AIDS into Development Efforts, Roland Msiska, UNDP Regional Project on HIV and Development in Sub-Saharan Africa, South Africa


With the AIDS pandemic continuing its global spread, there has been growing awareness about the need to address both its causes and effects by "mainstreaming AIDS" into development processes and instruments.

Although important progress has been made in operationalizing this concept, technical support to partner countries has remained patchy so far. In response to this, the UNAIDS Secretariat has integrated “technical support to mainstreaming processes in partner countries” as a Key Result in its Directions for the Future document.

The present Strategy Note tries to clarify the rationale for mainstreaming AIDS, proposes a working definition, and summarizes a number of general principles and lessons learnt. It closes with a brief presentation of the Secretariat's Action Framework 2004-2005, which aims at complementing existing efforts, including in particular those being undertaken by UNAIDS Cosponsors.