

The Challenges and Dilemmas of Intergovernmental and Intersectoral Coordination

Input paper prepared for the Learning Event of the
HIV/AIDS and Local Government Learning Network

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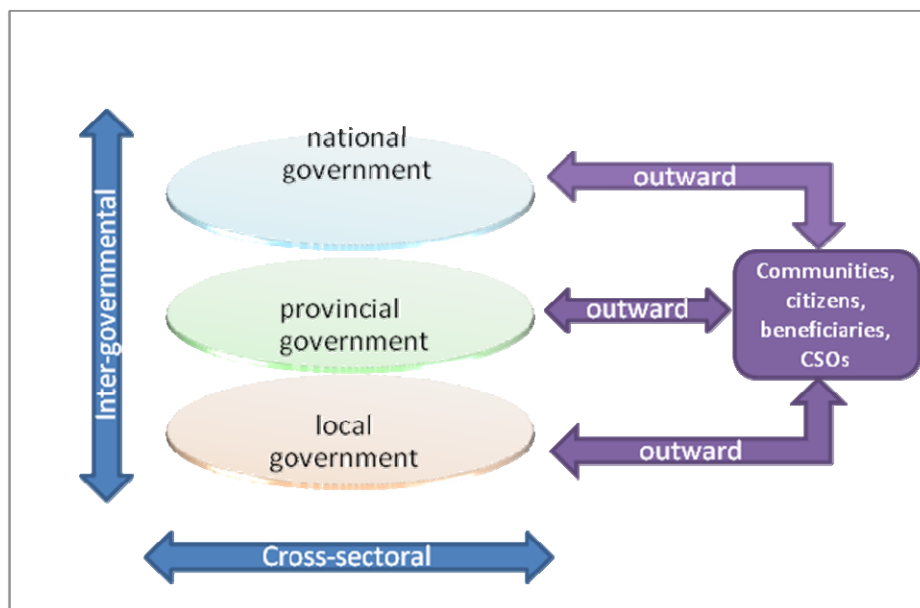
Introduction

The launch of the *Framework for an integrated local government response to HIV and AIDS* (dplg 2007) signalled a critical move away from the one-dimensional way that HIV/AIDSⁱ has been seen both nationally and internationally over the last 20 years. For most of this time, the responsibility for dealing with HIV/AIDS was largely located with the Department of Health with people being urged to take individual responsibility for their lives by remaining safe from HIV infection. This was known as the ABC (Abstain, Be faithful, Condomise) message. However, in the last few years, researchers have begun to argue against seeing the HIV/AIDS epidemic in this narrow manner as it became clear that the ABC message alone is not having the desired response in reducing the number of infections. International perspectives on HIV/AIDS have suggested that people living in urban informal settlements are disproportionately vulnerable to infection due to their lack of access to basic services like water and sanitation, and the conditions created by unemployment, informality, overcrowding and poverty (Collins and Rau 2000, Holden 2004, van Donk 2006). These same conditions make it hard for people to cope with the effects of HIV infection on them as individuals, their family members and communities. In already impoverished conditions, the burden caused by HIV/AIDS is so much worse and results in deepening poverty causing more vulnerability and insecurity. In light of this recognition, it is very encouraging that the dplg launched this *Framework* as it not only signals a move away from the narrow responses to the epidemic towards a more holistic approach but also locates the response for this approach in South Africa squarely within the ambit of local government. This ties in firmly with the policy discourse and governance system in South Africa as a whole which is about intergovernmental coordination and comes together in the Integrated Development Plan (IDP), the key strategic plan and instrument at local government level. Local government has been tasked with the developmental mandate of addressing poverty and inequality through the promotion of integrated and sustainable human settlements and the promotion of local economic development. According to Patel and Powell (2008) 'municipalities have to respond to the myriad of national and provincial policies seeking to provide state relief to those living in poverty whilst promoting sustainable livelihoods and settlements.' In light of this responsibility assigned to local government as well as its location which sees it as the sphere of government 'closest to the people', it is the logical choice for driving a localised response to the HIV/AIDS epidemic.

The expectations of local government are extremely ambitious and while the above makes sense in theory, we need to look at the lessons and experiences of local government over the past 10-15 years. One of the key lessons is the fact that there are no clear-cut solutions or plans that fall neatly into place and that one of the key challenges that we have to deal with is navigating the complexity of the system of intergovernmental relations. This complexity permeates all spheres of government as decisions and trade offs need to be made. However, this is even more acute and relevant at local government level where it is expected that all government's developmental ambitions and the implementation of these come together within the municipal sphere. So, what makes this system so complex, particularly for municipalities? There are two key points to be made in this regard. Firstly, one has to acknowledge the tensions between top-down and bottom-up engagement, both amongst the spheres of government and also in terms of the relationship between government and civil society. One of the key points about this intergovernmental system is that it is meant to involve a process of integration, communication and coordination amongst all the key parties that will be involved, including both those responsible for policy making and the delivery of services. Thus there has to be continued engagement (both up and down) between national, provincial, district and local governments and this should be informed by engagement with communities and the voices of those directly affected by any policies or plans that are implemented by government. The second point relates to the fact that at the same time that engagement is (supposedly) taking place between the spheres of government and communities, there also has to be cross-sectoral engagement at the

municipal level. Thus, if one takes the principle of sustainable and integrated development, a number of different departments have key roles to play, including the departments of housing, transport, water and sanitation, health, planning etc. Despite their own sectoral priorities, they have to find a way to collaborate to deliver on the mandate of sustainable settlements. At the same time, these departments also have their own top-down and bottom-up engagement with their counterparts at provincial and national level as they have specific priorities and mandates to carry out. Given the upward accountability towards sector departments it becomes clear that this is a very complex system that sees departments having to straddle upward, downward, horizontal and outward responsibilities, pressures and trade-offs (see Figure 1).

Figure 1: Horizontal and Vertical Dimensions of Government



The vision of intergovernmental and intersectoral coordination is extremely compelling, appealing and progressive and necessary if we are to achieve the objectives of poverty eradication and equitable, integrated and sustainable growth. But if we are to implement this effectively, it is necessary that we consider the real obstacles, some easier to overcome than others. If we are to develop an integrated and holistic response to HIV/AIDS, we need to understand these challenges and how to respond to them. One of the key challenges has been about how to ensure the effectiveness of the IDP, intended as the 'blueprint' for the complicated task of responding to the myriad of issues relevant to the municipality including poverty relief, economic development and provision of basic services. For it to be representative of all the relevant concerns in the municipality, the IDP should be informed by national and provincial policies as well as a process of bottom up engagement with communities to ensure that the voices of ordinary people are heard (Pieterse and van Donk, 2008; Pieterse, 2004).

Realities of intergovernmental coordination and the IDP

Local government has undergone repeated changes and modifications over the past 10-15 years in order to determine and streamline its role (Patel and Powell, 2008). This also tied in with the post 1994 processes of realignment and redefining of the spheres of government, the processes of intergovernmental coordination and how best to ensure that the system responds to developmental needs in post-apartheid South Africa in an equitable and sustainable manner. This was obviously a huge task and the resultant challenges and difficulties reflect the complexities that had to be and still are negotiated on a daily basis. One of the biggest challenges at local government level is the lack of

skills and capacity to develop an IDP that is representative of all the developmental concerns in the municipality and that was developed through an effective process of bottom-up as well as top-down engagement amongst the different spheres of government as well as community participation. This is illustrated by the 2005 finding of the dplg that more than 60% of municipalities required some kind of support to develop effective IDPs with at least 28% unable to develop effective plans even with some kind of support (cited in Harrison 2008). This has prompted the question of whether IDPs 'have contributed to institutional overload, or whether they have helped local authorities better structure and process the many obligations they are confronted with (Atkinson 2003 cited in Harrison 2008: 324).'

Perhaps one of the first steps is to recognise that the IDP evolved out of a complex process aimed at understanding and defining integrated and sustainable government planning or as Harrison (2008: 326) puts it 'South Africa's IDP is the outcome of a complex set of contextual and global influences, and represents one of the clearest examples of a new generation of planning tools that emerged during the 1990's.' This process has been influenced by international discourses like the sustainability agenda and also the idea of urban management, concerned with developing a more corporate and accountable public service. Yet all of these also had to take into consideration the developmental mandate of poverty alleviation and equitable and sustainable growth (Harrison 2008). Currently, local government is seen as the sphere of government where all the developmental ambitions and aspirations of national and provincial government come together. Local government has to respond to the ideals of poverty alleviation through the creation of sustainable human settlements, they have to provide basic services and also need to take responsibility for the creation of 'viable and robust' economies to respond to the problems of unemployment and poverty (Patel and Powell, 2008). According to Patel and Powell (2008) despite the fact that the three spheres of government are independent, the municipal area is the space where all policy is implemented. Thus, the IDP emerged from all these factors as the instrument for an integrated system of government that brings about development and growth. However, for this system to work there has to be a clear understanding of the intergovernmental system, the role of each sphere and the ability for municipalities to engage with and inform national policy. This should of course be informed by engagement between municipalities and their local constituents. Without this bottom-up engagement, it is highly unlikely that the IDP will be integrated, sustainable, informed and able to respond to the ambitious developmental mandate assigned to it.

Cognisance should also be taken of the challenges and realities of the intergovernmental system. For example, in light of the complexities associated with intergovernmental coordination and factors like the lack of capacity and skill at local government level, can we realistically expect that the plans articulated in the IDP will be implemented? Even if IDPs contain all the correct ingredients, it cannot be assumed that this will automatically translate into practice and it is important to be realistic about these shortcomings. It is also necessary to consider the criticisms levelled by some at the IDP, like the fact that instead of encouraging engagement with local communities it instead stifles effective community participation as it concentrates on effective institutions and management of these (Harrison 2008). Another critique by Harrison (2008) questions whether or not IDPs have really had an impact on the lives of ordinary citizens if one considers the massive backlogs that still exist in terms of basic services provision.

Despite all these critiques of the IDP as the instrument for intergovernmental relations, it does have the potential to be an effective tool. This is if it outlines clear and articulate plans for local government to respond to its mandate but it should consistently be reviewed and local government be held accountable for its actions. What this also requires is that municipalities have the power, authority and ability to be flexible in order to move away from their very rigid thinking to find new and innovative ways to respond to the challenges within their jurisdiction (Pieterse and van Donk

2008). This is particularly vital as many municipalities do not feel like they are on an equal footing with the other spheres of government and instead feel like they have no clout or power and are merely the implementers of nationally policy (Schmidt 2008). If the intergovernmental system of governance is to work, local government needs to feel like it is an equal partner in the process. This is not happening at present and instead of the system working in the favour of local government by streamlining and integrating developmental priorities, as initially intended, municipalities that are already under-resourced feel besieged by any new challenge that becomes just another unfunded mandate. Municipalities often feel that their responsibilities are being prescribed to them and a matter like HIV/AIDS just adds further complications (van Donk 2008).

What does this mean for HIV/AIDS?

According to the *Framework for an Integrated Local Government Response to HIV and AIDS* (2007: 21), the system of intergovernmental relations 'is an important mechanism for crafting and implementing multi-sectoral responses to HIV and AIDS that are co-ordinated across the three spheres of government.' In light of the role and importance attached to the IDP as the instrument which reflects the culmination of all the policy priorities and plans of the three spheres of government, it is also seen by the *Framework* as the most appropriate plan to mainstream HIV/AIDS in local government.

The *Framework* (2007) provides the following guidelines for municipalities to ensure that HIV/AIDS is adequately mainstreamed in the IDP:

- Mainstreaming HIV/AIDS through participation: IDPs are seen as the outcome of a collaborative process between national, provincial and local government as well as the communities within the municipal jurisdiction. Thus, for the IDP to reflect the challenges of the HIV/AIDS epidemic it is crucial that it includes the voices of people, households and communities that are affected by HIV/AIDS. As has often been noted, this should not merely be a superficial once off process but should include real ongoing consultation.
- Developing knowledge to inform local level responses to HIV/AIDS: It is critical that the municipality is in possession of relevant HIV/AIDS statistics in its area. Many municipalities, however, do not have up-to-date and accurate information about HIV- prevalence and incidence statistics in their areas. In addition, they do not understand the factors that make people vulnerable to infection as well as affecting their coping mechanisms. Thus, it is absolutely critical that municipalities engage in research and information collection in order to make informed decisions about what is required, what the needs of affected communities are and therefore what the priorities are that should be included in the IDP to deal effectively with the epidemic. Similarly, municipalities should be aware of the effect of HIV/AIDS on their staff members who themselves might be HIV positive or responsible for family members who may be infected or affected. This is of importance in terms of the cost implications that absenteeism or a low productivity rate might have on the ability of the municipality to function effectively and carry out its service delivery mandate.
- Checklist for assessing HIV/AIDS mainstreaming in the IDP: A number of key questions are provided for municipalities to determine whether or not HIV/AIDS has effectively been mainstreamed in the IDP.

As noted previously, the *Framework* recognises the intergovernmental system of governance, the different roles located to each sphere of government and also the role of the IDP in ensuring that all the relevant issues are planned for. Importantly, it provides some clarity in terms of the intergovernmental and intersectoral responsibilities of each department. For example, if one looks at the role of the National Department of Housing, it is to 'develop and implement legislation, policies and strategies to ensure that the right to access to housing is realised for all and that, where

necessary, special attention is given to the needs of households affected by HIV and AIDS' (dplg 2007: 25). It is then the role of the provincial department for housing to work with municipalities to identify the relevant households which require assistance and to cooperate with these municipalities to ensure the provision of adequate housing and shelter. However, this is marred by the fact that a number of assumptions are made in the *Framework*. Firstly, the *Framework* does not appear to recognise the dynamics and complexities of different municipalities (e.g. urban versus rural and big versus small). If one considers the point made earlier that more than 60% of municipalities are incapable of developing IDPs without support, this is particularly important. Many under-developed and under-capacitated municipalities (especially those in rural areas) are not even able to develop an effective and integrated IDP, let alone mainstream HIV/AIDS as suggested in the *Framework*. It is important that these assumptions about the capacity and ability of municipalities to deliver (even if one does not take HIV/AIDS into consideration) are considered and that this is sufficiently recognised.

It is also highly unlikely that municipalities who are not even able to develop IDPs will have the capacity to play an effective coordination, implementation or advocacy role. Whereas the metro's, given their importance in terms of the national economy, their size and capacity, might be able to both play their expected roles as well as voice their opinions in terms of their needs, smaller municipalities (especially in rural areas) will be less likely to have any impact in this regard. Another potential challenge for the *Framework* is that it may unintentionally reinforce a perception that the HIV/AIDS epidemic is homogeneous by not sufficiently emphasising that epidemics can vary between and even within (in the case of urban municipalities and metros) municipalities and that HIV/AIDS can manifest itself as different localised epidemics in the same municipality. For example, in an area like Khayelitsha, in Cape Town, where the HIV prevalence rate is 33% a different response would be required to Blaauwberg where the infection rate is relatively low at 7%. Thus, it should be emphasised that municipalities have to take cognisance of these complexities when they attempt to negotiate an already complex system.

The *Framework* (2007) sees the role of the municipality as broken up into four key components, that of a doer, enabler/regulator, co-ordinator/facilitator and a connector. All these roles have intergovernmental or intersectoral dimensions to them. For example, as a doer, the municipality is tasked with ensuring that the relevant financial and human resources are available for responding to HIV/AIDS. However, due to expectations from other spheres of government or departments, municipalities are often constrained (or in some instances enabled) by other pressures and responsibilities that are not within their control. As an enabler/regulator it's the role of the municipality to enable key stakeholders to participate in HIV/AIDS response. For example, it should assist CBOs or NGOs by providing access to available resources like buildings or vehicles that will assist these actors in launching their responses. Also, through its daily functioning municipalities should be aware of how its services affect those within its municipal area. The connector role allocated to municipalities suggests that it should act to bring together relevant actors in the HIV/AIDS response. For example, it should link up stakeholders, within its jurisdiction, who require services with the relevant service providers by acting as a referral point for people who may require access to voluntary counselling and testing stations, access to ARV's or even orphans and vulnerable children that may need specific care (dplg, 2007). However, it is the co-ordinator or facilitator role of the municipality that appears to be the most relevant, particularly in light of the preceding discussion. In the role of coordinator the municipality is responsible for bringing together all role-players in an integrated and coordinated effort to ensure optimal use of resources and provision of services to communities especially those affected by HIV/AIDS. In South Africa's system of intergovernmental relations municipalities are positioned as the key actors (and coordinators) in terms of implementing government policy. In light of this they also appear to be ideally placed to spearhead an integrated response to HIV/AIDS. Yet, it is necessary to acknowledge that this role is

the ambition and aspiration for local government and that there are a number of practical realities which prevent local government from reaching this aspiration. While it makes sense to regard municipalities as the key players, in reality, the system is very hierarchical and municipalities are merely seen as implementers instead of crucial participants (Schmidt 2008). Municipalities should in fact have the power and authority to enforce participation and engagement from all the roleplayers and it should be able to 'call the shots' when it comes to determining the need in its area of influence and therefore what the associated and relevant response should be. Local government should be able to hold the other spheres of government accountable for their in/action. Yet, if one considers the difficulties that already exist in terms of the existing governance system, this seems highly unlikely and it is exacerbated by the perception that local government is the implementer of national policy instead of an equal inter/dependent partner in the process.

This ties in with another role for municipalities (not included in the Framework) and it is possibly an extremely significant role at present, namely that of an advocate. As the sphere of government that most experiences the realities of what is happening on the ground, particularly their experience of the HIV/AIDS epidemic, municipalities should become more vocal about their needs and requirements. Using the information and understanding of their localised epidemics they should demand that other stakeholders (especially civil society organisations) and other spheres of government perform their respective roles and responsibilities within the municipal area.

Another key change that needs to happen at all three spheres of government is an improvement and expansion of the understanding of HIV/AIDS and its effect on the core business of municipalities. Depending on the nature and scale of the epidemic in the municipal area and the capacity and resources of the municipality, HIV/AIDS can have a number of different (in many instances devastating and long ranging) effects on the communities within the area as well as the municipality. While these implications may vary depending on certain factors and some municipalities may be worse affected than others, the point to be made is that if they are to develop an effective and integrated response to the epidemic in their areas, municipalities have to understand what exactly is happening, what the need is and therefore what is required of them.

It is clear that the HIV/AIDS epidemic has serious implications for the developmental mandate of local government and the nationally stated priorities of poverty alleviation and development. Also, given the intersectoral coordination that has to happen between sector departments (national, provincial and local) the implications do not stop at local level but will permeate all levels of society, albeit in different ways. In light of this, we need to look at our current system of governance and interrogate whether it is capable of bringing about the developmental policy priorities, particularly taking into account the challenges posed by HIV/AIDS.

Questions for discussion:

- If one considers the fact that HIV/AIDS will fundamentally alter the reality on the ground in terms of services that are required or the type of communities that will emerge, what are the expectations from government and especially local government? What does this mean for intergovernmental and intersectoral relations?
 - o Is the current system of intergovernmental relations, despite all its complexities, sufficient to deal with the challenges posed by HIV/AIDS?
 - o Or does HIV/AIDS expose some of the critical flaws in the system and spur on the need for a review of the system of intergovernmental relations?
- What institutional mechanism(s) or modality(ies) is/are most effective to coordinate an intergovernmental and multisectoral response to HIV/AIDS? For example, are HIV/AIDS

coordinators too marginalised? Do they actually make a difference? Is there some way to get them into the mainstream?

- Given the inability of the majority of municipalities to develop an effective IDP, what is the likelihood of a comprehensive local response to HIV/AIDS?
- The *Framework* recognises the importance of intersectoral and intergovernmental relations but what is the action plan for engaging other departments? What type of engagement is needed?
 - o What are the entry points to push for such engagement?
 - o Is the network/its members focussing its energies in the right direction?

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ⁱ In many other instances and research done by others, reference has been made to HIV and AIDS as a way of recognising the different nature and impacts of infection with HIV compared to the development of AIDS, and its related illness. While this is recognised this paper will use the abbreviation 'HIV/AIDS.'