The Centre for Economic Governance and AIDS in Africa (CEGAA) was established in 2006 to contribute to improved economic governance, fiscal policy, financial management, and accountability, with an emphasis on improving the response to HIV/AIDS, malaria, and tuberculosis (TB) and strengthening health financing and information systems. CEGAA does this primarily through research, advocacy, and capacity building with state (government, parliament, and statutory bodies like the National AIDS Councils) and civil society actors. CEGAA attempts to facilitate dialogue and interaction among these actors so as to enhance overall economic governance in African countries. Through its experience in managing multi-country projects aimed at building the capacity of in-country partners, CEGAA has developed an effective approach to developing partnerships, building awareness of budget monitoring and expenditure tracking at all levels, transferring skills, and providing technical support. CEGAA also has significant hands-on experience in costing, budget analysis, resource tracking, and financial information systems around health and HIV/AIDS in the Southern and East African regions.

CEGAA Partners with Governments and Civil Society to Improve the Efficiency of Health Financing and the Response to HIV/AIDS

Over the last four years, CEGAA has worked directly with National AIDS Councils and ministries of health in a number of African countries, primarily by providing training and estimating the resources required, both in public funds and donor commitments, to respond effectively to HIV/AIDS, TB, and malaria. For example, in South Africa CEGAA estimated the costs of an adequate response to HIV/AIDS through 2031 and is now working with the South African National AIDS Council, the Department of Health (DOH), the National Treasury, donors, and the business sector to develop a long-term plan for sustainable financing. The National Treasury has since dramatically increased public allocations made to the DOH’s HIV/AIDS program in the 2010/11 budget and over the medium term expenditure framework (MTEF).

CEGAA has also focused on increasing the capacity of civil society organizations (CSOs) in several African countries to monitor their government’s budget allocations and expenditures for health and HIV/AIDS. These CSOs have generated sound evidence that will strengthen advocacy campaigns for critical reforms and policies in their countries. In addition, CEGAA undertakes various research projects as well as strengthens its partners’ ability to prepare methodologically rigorous analyses and reports. For example, CEGAA worked with partners in Kenya, Tanzania,
and Zambia to conduct research and analysis on the impact of the International Monetary Fund’s (IMF) fiscal and monetary policies on the capacity of governments to respond to the HIV/AIDS, TB, and other health crises in those countries.

CEGAA also has trained and supported countries in East and Southern Africa to undertake National AIDS Spending Assessments (NASAs), which have provided powerful data to government, civil society, and donors on the financial gap between resources available and those needed for HIV/AIDS. The NASAs provide indicators of each country’s financial response to AIDS and support and strengthen a country’s national monitoring and evaluation framework by establishing a financial information system to oversee resource mobilization. On behalf of the UNAIDS Technical Support Fund, CEGAA provides the training, technical assistance, and content expertise for National AIDS Councils to conduct the NASA. To date CEGAA has undertaken (or supported) NASAs in a number of African countries – Botswana, Ghana, Kenya, Lesotho, Mozambique, Namibia, Swaziland, Zambia, and Zimbabwe.

The NASAs provide very powerful evidence to inform both governments’ and donors’ resource allocation decisions. For example, in Botswana, the NASA data indicated that the increase in spending on treatment came at the expense of prevention activities like interventions for high-risk groups, such as commercial sex workers (CSW) and men who have sex with men (MSM). As a consequence, Botswana’s National AIDS Coordinating Agency (NACA) mobilized additional resources for prevention from donors, while the country’s gay and lesbian network put pressure on the government to increase programs for MSMs and CSWs, which resulted in a program targeting high-risk groups. In Zambia, the NASA found limited alignment between HIV/AIDS prevention and treatment efforts and the National HIV/AIDS Strategic Plan. This information enabled the country’s National AIDS Council to engage more meaningfully with its many donors to ensure an integrated and comprehensive response.

CEGAA also has worked with governments to improve their expenditure reporting and financial information systems, which has contributed to improved economic governance and greater efficiency, transparency, and accountability.

**CEGAA’s Participation in the Partnership Initiative**

CEGAA works jointly with the Treatment Action Campaign (TAC) to increase access to affordable and equitable good-quality health services for persons living with HIV/AIDS and tuberculosis (TB) in two districts in South Africa. Their collaborative project focuses on effectively mobilizing civil society organizations, establishing partnerships with CSOs and local government, and empowering the community in order to strengthen health care systems and improve health care spending and its outputs. A coalition of HIV/AIDS and TB community organizations has been formed to exert influence on the government’s implementation of the budget at the local level, while simultaneously building local government capacity on expenditure tracking for improved budget planning and social and financial accountability. CEGAA and TAC seek to increase participation in budget processes at the local level by building the capacity of citizens, communities, and local government officials to monitor budget formulation and implementation for HIV/AIDS and TB.