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the CapacityProject
Planning, Developing & Supporting the Health Workforce

Working from the Inside: Mainstreaming HIV into Government Planning in Kenya

Children in Nairobi

Meshack Ndolo has a story to tell about an important aspect of Kenya's national response to HIV. This is a story about the successful process of working within the government—in an innovative way—to achieve significant results.

First, a look back. It's 1989, and Meshack Ndolo of Kisumu is worried. He's working at the Ministry of Health while teaching at Kenya Medical Training College, and he sees the increasing spread of HIV. Since the country's first case was reported in 1984, more and more Kenyans have been dying. But Ndolo finds that only a handful of people seem to know the basic facts and how to protect themselves. Around that time, "I developed an interest in information on HIV/AIDS."

Throughout the 1990s, HIV prevalence rose at alarming rates. In 2000, the Kenyan government established the National AIDS Control Council (NACC) to coordinate the multisectoral response. But while many government agencies and partners were working hard to address what had become a pandemic, there remained serious gaps and unmet needs.

"I helped to set up NACC and used to work there," Ndolo recounts, "and previously at the Ministry of Health at a time when HIV was barely recognized as a development challenge with significant impact beyond the health sector. I wanted to help other sectors know about the role they can play."

Since 2005, the Capacity Project has been working in Kenya to increase the public health sector's ability to mobilize health professionals and strengthen workforce planning and management. As part of this work, the Project supports five technical staff who are assigned to work within various government agencies. One of these people is Meshack Ndolo, who serves as the HIV, AIDS and development program advisor for the Ministry of Planning and National Development (MPND).

Meshack Ndolo (center) with colleagues

"We quickly realized that not all ministries had data or budget lines for HIV," Ndolo recalls. "My role was to ensure that the MPND worked through the planning framework and the budget system to get every unit money for HIV/AIDS." Also, "AIDS Control Units were working in isolation from the Planning Divisions. We needed to ensure linkages between the AIDS Council, these units and the MPND. Next I worked on the budget process and conducted several training programs. This way every ministry could see they need to have their own internal resources to mount a challenge to HIV/AIDS."

In just two years, Ndolo's efforts have produced remarkable results. Budgeting is now mandated across government ministries for mitigation of the pandemic's socioeconomic impacts. There is

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Ndolo outside the MPND

increased funding for strengthening central planning and programming, and a 150% increase in government funding allocations for HIV/AIDS over the last two years. Ndolo adds, "I also worked closely with Children's Services to advocate for increased allocation of money for orphans and vulnerable children. Within a year they had an allocation of $862,000, and this multiplied three times in two years to $2.6 million."

How did Ndolo achieve such feats? For one thing, by being a true insider. Although employed by the Capacity Project, he explains that "I wear the face of a Ministry of Planning employee, where I report to the permanent secretary—in that way I'm very accommodated and accepted. My previous work involved interacting with Ministry of Planning staff, and the fact that I am a local here made a lot of difference. Operational systems—I know how they work. That made a big difference for the government in terms of raising the profile of HIV/AIDS in *planning*," he emphasizes.

"We have had success at the national level," he asserts, but "now we need to focus on the district level. This is where the real work that benefits communities takes place. I did work with partners to train 170 district planners and empowered them with the process of getting money for HIV/AIDS. We're planning regional support programs to follow up."

Looking ahead, Ndolo comments that "the attention of this country is moving toward decentralization and improving systems of governance. My role is complementing these efforts and ensuring that HIV and AIDS is factored at every stage of medium- and long-term planning. HIV/AIDS programming now requires sustainable financing strategies, and we need to have very clear planning at the district level. HIV/AIDS is a longstanding development challenge to Kenya's economic growth," he concludes, "and therefore raising its profile in the planning process is good for the sustainability of the interventions I initiated."

Building housing the MPND

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