



The warriors and the faithful

The World Bank MAP and local faith-based initiatives in the fight against HIV and AIDS



Executive summary

This briefing paper reviews the procedures and processes of the World Bank's Multi-Country AIDS Program (MAP) with regard to funding local faith-based initiatives, particularly through the experience of Tearfund partner organisations. The paper seeks to contribute to the debate on the need for more and better aid, the implementation of the 'Three Ones Principles', and the role of civil society organisations in national responses to HIV and AIDS. It identifies concerns and suggests approaches that could help improve access to resources and provide critical information on the experience of these initiatives.

Local faith-based initiatives make a critical contribution in the response to HIV and AIDS in many contexts. This includes preventative action and provision of care for those affected by HIV and AIDS, particularly orphans and vulnerable children (OVCs). In many contexts, they are the major part of community responses. However, many now need external resources.

The World Bank, particularly MAP, explicitly acknowledges the important role of faith-based organisations (FBOs) and community-based initiatives in responding to HIV and AIDS. MAP projects have funded more than 30,000 sub-projects since 2000. Most were at community level; many had a faith basis. MAP has recognised that many community-based organisations have limited capacity, particularly for proposal writing, evaluation and accounting. It provides support for capacity-building; this has included two regional workshops for FBOs. However, there remain concerns in relation to disbursement of funds to civil society organisations in some countries. MAP recognises that monitoring and evaluation is weak in many projects, so there is little information on impact and what would improve implementation. MAP is obliged to work through governments and is a funder rather than implementer. This puts limitations on what it may do and may cause dilemmas. It is important to recognise that often national or local decisions rather than the design of MAP are responsible for issues of concern.

Tearfund partners are seriously concerned about MAP and other international funding. They feel that their own initiatives are of good quality and have the potential for even greater impact, but the international funds do not yet have effective mechanisms for enabling faith-based organisations (FBOs) at local level to access resources. The partners' perception is that their values and basis of operation are not appreciated in country, and approaches to design and implementation exclude them; they also feel that monitoring and evaluation systems are not tracking how funds are being used and so are not picking up their concerns. Many of these issues would be applicable to most community initiatives, not only those that are faith-based.

The attitude of national government and its warriors¹ in understanding the role of local faith-based initiatives and in ensuring support reaches them is critical. The challenge to the Bank is how to make the system work better in this regard when it requires that governments handle funds. Among the faithful, those with influence and resources have a responsibility to ensure that the case is made for supporting local faith-based initiatives, and that potential beneficiaries have the information, skills and 'voice' that they need.

Tearfund makes several recommendations:

INTERNATIONAL DONORS TO MAP, MAP ITSELF AND NATIONAL AIDS COUNCILS need to:

- further strengthen monitoring and evaluation mechanisms to track how funds are being used
- provide feedback to project management.

NATIONAL-LEVEL FBOs AND INTERNATIONAL FBOs need to provide strong national-level support to local faith-based initiatives by:

- developing skills and experience among local FBOs
- supporting evaluations and improving communication on what has been achieved
- developing institutional arrangements to facilitate effective access to funding from MAP
- speaking out where required, and appropriate, on implementation at national level, on the speed and nature of the response.

Introduction

The scale of the HIV and AIDS epidemic is alarming. More than 20 million people have died from AIDS. Latest estimates suggest that nearly 40 million people are currently living with the HIV virus.² More than 14 million children have lost a parent to AIDS. Africa, the focus for the World Bank's Multi-Country AIDS Program, accounts for more than 60 per cent of the infections and 75 per cent of the mortalities worldwide. Approximately 25 million people in Africa are HIV positive and 2.3 million died in 2003. Young women aged 15 to 24 are more than twice as likely to be infected as their male counterparts.⁹ In some countries in southern Africa more than one in four adults is positive. There are huge social costs as AIDS breaks down families and communities. AIDS is a major threat to development. Key workers are being lost disproportionately and economic growth is threatened.

Tearfund³ has extensive experience of supporting responses to HIV and AIDS through partner organisations in Africa and elsewhere. Some of these responses began almost 20 years ago. Tearfund partners in many countries across Africa and Asia have taken a lead among civil society groups in tackling HIV and AIDS, through prevention education, home-based care, and by working to lessen the impact of the epidemic, especially on children. Tearfund's highest priority is enabling its partners to respond effectively to HIV and AIDS. This focuses strongly on support for building on, and strengthening, community initiatives in response to HIV and AIDS.⁴

For many Tearfund partners, the key to their response is that members of local church congregations are helping neighbours affected by HIV and AIDS in practical ways. Typically this is a spontaneous, informal reaction to the needs that people see around them. It is carried out on a voluntary basis, often with sacrificial provision of time and material resources. Foster⁵ describes how, when aggregated, the response of local congregations in Africa makes up a significant proportion of the overall support provided to people affected by AIDS, particularly OVCs. However, the extent of the need is overwhelming people's own resources. If the support that they provide from their own resources – particularly material – is not supplemented from external sources, they will not be able to sustain and extend it as the

effects of the AIDS epidemic deepen and expand. Furthermore, the rapid spread of the pandemic means that local initiatives also need additional skills to respond effectively and use any external resources made available.

Faith-based organisations (FBOs) – a wide range of players

Many international donors consider FBOs to have an important role, especially in the response to HIV and AIDS. However, there is a wide range of FBOs and it is not always clear to whom donors are referring when they talk of 'FBOs' – what sort of organisation, and working at what level? MAP introduces FBOs as:

'... religious affinity groups, including Christian, independent, Islamic, Hindu, Judaic, traditional and other faiths. Although their primary aim is to provide spiritual teaching and guidance, most are enjoined by faith to undertake a social mission that includes teaching, care and welfare.'¹¹

Foster⁵ distinguished four categories of within-country FBOs for his study:

- **CONGREGATION** A local grouping of believers such as a church, or mosque, who meet on a regular (usually weekly) basis.
- **RELIGIOUS CO-ORDINATING BODY (RCB)** Intermediary organisations responsible for co-ordinating and supporting congregations such as a diocese or National Evangelical Fellowship.
- **NON-GOVERNMENTAL ORGANISATION** Faith-based NGOs employ staff, receive external donor support and are answerable to a group broader than a congregation or RCB.
- **COMMUNITY-BASED ORGANISATION (CBO)** Local groups differentiated from NGOs because they do not employ full-time staff.

There are also internationally operating faith-based NGOs that provide funds and implement programmes. These usually have a base in a particular developed country (eg: CAFOD, Christian Aid and Tearfund in the UK). Some of these have formed international groupings (such as World Vision International).

The local faith-based initiatives that are the focus of this briefing paper derive largely from congregations and CBOs. Usually their budget is minimal and the help is voluntary. In contrast, World Vision International has an annual global income exceeding \$1.25 billion and 20,000 employees.

Tearfund partners reflect the range found within any given country. They are usually a religious co-ordinating body (such as the Evangelical Association of Malawi and the Anglican Diocese of Narok, Kenya) or an NGO (such as Kubatsirana, Mozambique, or AEE, Rwanda). The former may have many affiliates, particularly at local level. Tearfund partners are exceptionally a local congregation or CBO as Tearfund usually works through intermediaries to support these.

In recent years, the impact and threat of AIDS have been increasingly recognised. Financial and technical resources to prevent, treat and care for the consequences of AIDS have increased massively. UNAIDS has estimated that, based on present projections, more than \$20 billion will be needed annually to mount a far-reaching and inclusive global response by 2008. Yet, as of 2003, only \$4.7 billion had been spent⁶. Three major sources of assistance have now been established which should significantly increase the availability of funding:

- The Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) has committed more than \$5 billion over five years.

- The World Bank's Multi-Country HIV/AIDS Program for Africa has committed \$1 billion for 2000–2005.
- The USA's President's Emergency Plan for AIDS Relief has pledged \$15 billion over five years (2003–2008).

Each of these mechanisms acknowledges the importance of community responses to AIDS, and the role of faith-based organisations – see panels on subsequent pages. According to the rhetoric, significant resources from these funds should be reaching the sort of grass roots Christian community initiatives to which Tearfund relates, and which are accomplishing so much.⁵ This is critical given the role played by such organisations. So, it is of concern that Tearfund's perception of the reality has been rather different. For example, a study of 15 churches in Malawi found that nine had applied to the National AIDS Council for funding (from the Global Fund and MAP) but eight had given up, due to delays and lack of response.⁷

The 'Three Ones Principles', agreed at a high level meeting in April 2004, are:

- one agreed HIV and AIDS Action Framework that provides the basis for co-ordinating the work of all partners
- one National AIDS Co-ordinating Authority, with a broad-based multisectoral mandate
- one agreed country-level Monitoring and Evaluation System.

It is widely recognised that civil society organisations, including community- and faith-based organisations, have played a leading role in responses to HIV and AIDS. Therefore, in the application of these principles at the country level, national AIDS co-ordinating authorities need to ensure meaningful participation of civil society. This means providing the resources and skill-building necessary to enable such participation. As a principle any fully comprehensive national AIDS framework should set out a clear role for civil society and allocate the resources to enable civil society organisations to play that role. Tearfund and partners believe that community- and faith-based organisations can play a vital role in ensuring that appropriate support reaches local community responses to strengthen existing initiative and motivation.

Why are international donors interested in supporting FBOs?

- The HIV/AIDS pandemic is so huge that traditional mechanisms that donors have used are not sufficient.
- Donors see behaviour change as a key to reducing the spread of HIV. FBOs are perceived to have a role in this.
- Donors appreciate all that local-level FBOs are already doing.
- Donors acknowledge that FBOs have a huge reach – they are often the only civil society organisation present in remote areas, are able to reach where governments cannot. They have an understanding of, and acceptance within, communities, often because of a long-standing presence.
- Coupled with this is the capacity of some religious co-ordinating bodies (such as dioceses) to reach from a major city accessible to donors to a large number of local institutions.
- FBOs are seen to be reliable and trustworthy.
- Donors are beginning to understand that faith is critical in the lives of poor people – FBOs 'talk this language'.

Key issues relating to local faith-based initiatives responding to AIDS in Africa – summary of a major survey⁵

During 2002–2003, there was a major study into the role of religious organisations in east and southern Africa in caring for children affected by AIDS. Research teams conducted interviews with 690 FBOs, mostly congregations and religious co-ordinating bodies. The study confirmed the critical role of local faith-based initiatives in the response to AIDS: more than 9,000 volunteers from these organisations supported more than 156,000 OVCs.

- **Local faith-based OVC responses are proliferating.**

They are widespread throughout Africa and are coping with the epidemic by adapting.

- **Community members start most initiatives, motivated by good will, compassion and the plight of those affected, as well as a calling to serve God.**

They rely on unpaid volunteers. They were founded without significant external facilitation or financial support. They extend help beyond members of the initiating congregation.

- **Overall, large numbers of congregations and CBOs are supporting significant numbers of OVCs.**

Although most initiatives supported fewer than 100 OVCs, some supported larger numbers. The number of initiatives involved means that cumulatively large numbers of OVCs are supported.

- **Community-level FBOs are responding in similar ways.**

The activities and structures of congregational initiatives were remarkably similar, yet few had ever visited or read of another initiative. This suggests that such approaches based around community priorities are the most appropriate and sustainable response.

- **Community-level FBOs are well organised.**

Governance and financial systems of FBOs, including many small newly established initiatives, were as well organised as those of larger NGOs. This suggested that they had the capacity to manage grants.

- **Community initiatives probably have limited long-term impact.**

The initiatives had brought about positive changes. However, given the scale and depth of need, it is likely that the support provided is insufficient to enable affected households to function adequately.

- **Community-level FBOs need external financial support.**

Congregations see the provision of basic material support to be a priority. However, for many, giving from within the congregation is the means of providing such support. This is proving to be inadequate to meet needs, putting congregations under strain.

This study initiates a process to reach a better understanding of the following questions:

- What are the intentions of the Global Fund and MAP towards supporting local faith-based responses to AIDS?
- What do the Global Fund and MAP believe has happened so far in terms of realising this support?
- What are Tearfund partners' experiences of these funding instruments in relation to local faith-based responses?
- What could be done to better match good intentions with need?

The questions are seen to be critical because in many ways the experiences of local faith-based initiatives are indicative of the experiences of many community responses to HIV and AIDS. If local faith-based initiatives are having difficulties, this is likely to be true for many community initiatives, regardless of their constitution.

The study is based upon review of available documents, information from staff of funding organisations, and contact with Tearfund partners relating to six African countries (Burkina Faso, Kenya, Malawi, Rwanda, Tanzania and Zambia). Constructive comments from the World Bank ACTAfrica Team have been appreciated.

This paper will focus on MAP. A companion briefing paper will address the Global Fund.⁸ These briefings lay the foundation for action-research in 2005, upon which Tearfund will work with partners in a number of African countries to identify ways in which mechanisms could be improved so as to increase the accessibility of resources – information, support and finance – to community initiatives, including those associated with faith groups.

The role of local faith-based initiatives in responding to AIDS in Africa – summary of a major survey

Typically, local faith-based initiatives carried out a range of responses within their community including the following:

- **MATERIAL SUPPORT** including the provision of clothing, food or meals.
- **SCHOOL ASSISTANCE** because fees and levies must be paid in order for children to attend school. Many provided fees for primary and sometimes secondary school. Some provide uniforms, equipment, books and boarding fees without which an OVC would be disadvantaged in their education.
- **HIV PREVENTION** Just over half of FBOs are involved in increasing awareness of HIV.
- **VISITING/HOME-BASED CARE** Volunteers identify needy families in their neighbourhood and regularly visit affected households. Visitors provide home-care for the terminally ill, offer advice and household supervision for children, prepare meals, help in maintaining dwellings and assist with household income-generating activities.
- **COUNSELLING AND PSYCHOSOCIAL SUPPORT** including sports and cultural activities and personal support.
- **MEDICAL CARE** through provision of fees or medicine.
- **INCOME GENERATION AND VOCATIONAL TRAINING** Many initiatives establish income-generating projects to raise funds. These include gardens, manufacturing co-operatives and petty trading. Projects have an important role in providing OVCs with experience and training in vocational skills.

The World Bank MAP for Africa

The World Bank initiated MAP in 2000 as a long-term effort to mitigate the effects of the HIV and AIDS epidemic and eventually reduce the rate of incidence of the disease. The first five-year phase is designed to put in place institutional and organisational mechanisms, build up the human capacity to undertake a large-scale programme of prevention, care, treatment and research, and scale up existing programmes.⁹ The Bank has approved a total of \$1 billion for MAP.

How MAP works

MAP funds, which are now being provided as grants, are available to any low-income (IDA-eligible) African country that meets the eligibility criteria laid out by the World Bank. The four criteria are to:

- have a 'coherent, national, multi-sectoral strategy and action plan for HIV/AIDS developed through a participatory approach' in place
- create a high level HIV/AIDS co-ordinating body with broad membership to oversee implementation of the strategy and action plan (a National AIDS Council [NAC])
- agree to channel funds directly to communities, civil society and the private sector, and contract out certain project administration and co-ordination activities
- agree to use and fund multiple implementation agencies 'especially community-based and non-governmental organisations'.

A unique aspect of the MAP Program for the Bank has been the introduction of a radically different approach to project design and implementation. The emphasis of this new approach, due to the nature of the epidemic, is on speed, scaling up existing programmes, building capacity and 'learning by doing'. The basic features include:

- very rapid project preparation (an average of ten months, less than half the Bank average)
- an open-ended menu of activities – almost anything can be financed
- client determination of the activities to be financed, often using participatory diagnostic techniques
- flexibility in implementation with streamlined procedures
- the involvement of non-traditional Bank partners in project execution, such as faith-based organisations
- complementing speed and flexibility with a major effort to ensure governments adopt a 'learning by doing' approach, using monitoring and evaluation to guide programmatic adjustments at all levels.⁹

A distinctive feature of the way in which MAP is constituted is that it has to work through national governments, usually through the NAC. Although 50 per cent of MAP funds are designated for non-government use, these have to pass through government.

Typically, a MAP project has four components (see page 10) including one to support civil society or community interventions. The mechanism by which resources are intended to reach non-governmental actors varies from country to country.

What does MAP fund?

MAP sees itself as being non-prescriptive, a funder of last resort that will provide for things which are necessary but outside the interests of other funders. However, in practice, most MAP projects approved in the first phase reflected the specific goals for this period, which were to:

- increase national awareness, political commitment and available resources
- promote a multi-sectoral response
- increase community and civil society engagement
- adopt 'extraordinary and exceptional' methods to combat the epidemic
- improve monitoring and evaluation systems to capture the lessons of experience and facilitate 'learning by doing'.

So, they tended to have four components:

- Supporting service delivery structures, particularly the Ministry of Health.
- Supporting line ministries to 'mainstream' HIV and AIDS in terms of workplace policies and practice, and adapting their programmes to accommodate its impact.
- Funding initiatives from civil society and the private sector (often known as the 'community' sector).
- Supporting the establishment and management of the NAC.

The limitations and dilemmas of MAP as a funder

MAP operates as a funder, not an implementer. It agrees to, and makes funding available for, proposals from a NAC. In turn, the NAC is not supposed to implement but rather, provide funds to organisations, agencies, government ministries etc, to implement activities based on the NAC's guidelines. Although MAP may have influence on the formulation of a proposal, ultimately the project is nationally owned. Countries may choose not to use all the options available to them from what MAP permits and encourages. At times, MAP may be put in the difficult position of whether to approve a proposal for a specific country which it believes could be better, knowing that rejection or renegotiation may cause further delays in the national response to HIV and AIDS.

With implementation, MAP is not directly responsible. It relies on the NAC ensuring that implementation is carried out in line with MAP's intentions. If this does not happen, MAP has the delicate role of getting agreement with the NAC as to the problem and solutions, and having the solutions put into place. With release of funding, it faces a similar dilemma around disappointing performance: does it withhold funding and curtail activities, or breach its own standards? These are the dilemmas of any funder but the situation is more difficult in the emotive context of HIV and AIDS and because national sovereignty is involved.

In making policy recommendations, this study acknowledges these limitations and dilemmas. It recognises the importance of determining whether an issue stems from the overall MAP design or how a country is using the MAP.

MAP's achievements

MAP has initiated development of AIDS projects in every eligible country. By January 2005, the Bank had approved projects in 29 countries and three sub-regional projects. This involved commitment of over \$1 billion and disbursements of \$375 million.¹⁰

MAP and local faith-based initiatives – policy

Since 1998, the World Bank has been actively developing relationships with faith communities with strong leadership from its President. Faith-based organisations are seen to have a key role to play as development implementers. There has been particular interest in FBOs in the context of HIV and AIDS.

Against this background, MAP has explicitly recognised the important role that FBOs could play:

- 'Faith-based organisations ... are religious affinity groups ... They continue to play an important role. They range from national-level institutions ... to independent, grass roots religious communities, with limited administrative experience. They have many important strengths: a strong commitment to education, care and social service; numerous adherents, particularly in the developing world; and unrivalled rural reach.'
- 'The role of African faith-based organisations in combating HIV/AIDS is widely recognised as having growing significance, but, at the same time, one which is not fully exploited given the influence and reach of FBOs in African societies. Their impact at the community and household levels and their well-developed on-the-ground networks make them uniquely positioned to influence values and behaviours and to mobilise communities.'¹²

This is reflected in the core documents for MAP which presume a role for FBOs alongside other civil society organisations, and in the more recently developed Project Appraisal Documents (PADs) which routinely refer to FBOs as potential implementers (see, for example, Malawi¹³). However, it is important to stress that the World Bank seeks to be 'faith-blind'. The importance of FBOs must be in their results, in what they bring to the table, rather than their faith basis.

Similarly, in relation to community-based initiatives, MAP provides explicit support in its Generic Operations Manual to working through community-based organisations. The manual even has a chapter on communities, with sections on 'Why are communities important?' and 'What must be done to support communities?' Again, Project Appraisal Documents routinely refer to responses at community level.

MAP and local faith-based initiatives – current practice

MANY SUB-PROJECTS FUNDED World Bank information¹⁴ indicates that MAP projects have funded nearly 30,000 sub-projects. A large proportion of these are at community level. For practical reasons, MAP may not identify which of these sub-projects are faith-based (for example, not all FBOs identify themselves as such), but it is a reasonable assumption that a significant proportion are. In both Ghana and Uganda, where the global trend towards decentralisation of government is well-established, the MAP has funded around 2,000 community initiatives.

RECOGNITION OF CBOs' LIMITED CAPACITY Often, as demonstrated by the experience of Tearfund partners (see page 13), those organisations with experience and expertise in responding at community level, struggle with aspects of receiving funding – submitting a proposal, keeping accounts, monitoring and evaluation, and using the results to inform their decisions and compose written reports.

MAP acknowledges this and funds capacity building for civil society. It also allows MAP projects to be operated in a way that does not put obstacles in the path of local initiatives. Application forms at community level can be as simple as providing a few lines in the local language. In some countries, MAP support is decentralised to the utmost degree, in the form of block grants to communities themselves (rather than to organisations).

ACKNOWLEDGING AND ENABLING THE IMPORTANT ROLE OF FBOs Early reviews of MAP suggested that FBOs were not involved in MAP projects, as they should be. Since May 2003, the Bank has hosted workshops in Addis Ababa and Accra with the following objectives:

- To empower FBOs to play a fuller role in the HIV/AIDS programmes by speeding up the disbursement of funds.
- To identify information gaps, access problems, capacity needs and procedural bottlenecks that have thus far limited FBOs' contributions to HIV/AIDS programmes under the MAP.¹²

The FBO workshops involved at least half of the MAP countries, and the resulting recommendations are available to all MAP countries on a CD Rom that contains all the presentations and lessons learned.

After the Accra workshop, the Bank hosted Francophone and Anglophone online discussion forums. These served as a channel for participants to share their post-workshop progress in working with NACs and other FBOs, and to continue to build upon the networking they initiated during the workshop. It also allowed participants to put questions and present ideas on ongoing issues that they were unable to clarify at the workshops, both to the Bank staff and to their fellow participants who had already gone through such experiences. Some MAP countries have gone a step further and hosted national FBO workshops to disseminate the information learned from the multi-country workshops to their peers in the country (such as in Nigeria and Kenya).

Concerns about disbursements to civil society organisations

There remain concerns in relation to disbursement of funds to civil society organisations (CSOs) in general in some countries. These were reflected in the MAP *Interim Review*, published in October 2004:⁹

'The community/civil society component has in some countries been the best-performing project activity, reaching large numbers of people often in remote areas and promoting active community involvement in prevention activities. In the majority of countries visited, however, the component is mired in complex, multi-layered review procedures causing delays of months and providing opportunities for rent-seeking. Funds are not reaching the intended beneficiaries with the urgency and using extraordinary and exceptional means as recommended by the MAP Program. In these countries, the civil society has expressed considerable frustration at the lack of progress in sub-project approvals.'

The fact that MAP was supposed to be a quick disbursement programme was often not reflected in the reality of CSOs' experiences. This is thought to be due, not to problems in the design of MAP, but to governments' interpretation of it. Governments are reluctant to fund CSOs, and have weak administrative capacity. In some cases, civil society capacity to absorb funds is also weak.¹⁵

What impact? Responding to a dearth of monitoring and evaluation

The ultimate aim of MAP is to mitigate the impact of HIV and AIDS. A considerable amount of information exists on the funding disbursed to CSOs, their use of it, and issues to do with disbursement practice; however, little is available on the results of civil society funding, and hence its contribution to achieving the overall aim. Monitoring and evaluation (M&E) appears weak in many MAP projects. This is despite the intent to 'complement speed and flexibility with a major effort to ensure governments adopt a "learning while doing" approach, using monitoring and evaluation to guide programmatic adjustments at all levels'; it is also despite the availability in most MAP projects of dedicated funding for the installation and implementation of an M&E system.

The World Bank has acknowledged that it takes this issue seriously.¹⁴ It has jointly established with UNAIDS, the Global HIV/AIDS Monitoring and Evaluation Team (GAMET), to focus on M&E. Under GAMET's auspices, a Country Support Team has been established of dedicated African M&E specialists who advise countries on how to build and strengthen their systems. In addition, the World Bank is one of the leading proponents of the 'Three Ones' initiative of UNAIDS, which urges all external partners to unify their support behind a strong, national M&E system (as opposed to multiple, donor-driven systems). Such a system would synthesise the data from multiple decentralised sources, including civil society at community level. Within this, it is recognised that capacity will need to be further strengthened in civil society – especially at community level – for proper evaluation. The Bank is a leader in this area, having recently produced guidelines with UNAIDS on community-based M&E.

Tearfund partners' perceptions of international funding

Tearfund partners have been surprisingly consistent in voicing areas of concern about the international funding instruments. However, the comments rarely distinguished between the Global Fund, MAP and others. Surprisingly, very few partners had direct experience of MAP, despite its explicit commitment to working with FBOs. So, the following comments relate largely to broad perceptions of international funding rather than widespread concerns about MAP. Where there were specific criticisms of MAP, the situation described was at variance with MAP's official position; this illustrates that many situations are determined by local decisions rather than the design of MAP. If anything, the national context, particularly the approach of government, determined differences between specific experiences, rather than the funding instrument in question.

Overall, the partners feel that local faith-based initiatives have something significant to contribute in the response to HIV and AIDS, but the funding instruments are not geared to supporting them. They perceive that the funders do not understand their basis of operation

and the values that lie behind their work, proposal design and implementation excludes them, and monitoring and evaluation systems are not adequate to track whether resources are reaching the poorest people or being used effectively. Whilst many of these comments would apply to community initiatives in general, beyond these it was felt that the distinctive nature of faith-based responses was not understood.

A fundamental mismatch in values and ways of operating

A strong thread ran through the perceptions of Tearfund partners towards international funding for AIDS. They feel that there is a fundamental mismatch between the values and bases of operation of local faith-based initiatives and those of funders. Funders are perceived as not understanding and appreciating these initiatives and what they represent. There is widespread concern at the role given to some NGOs who appear to have abandoned their roots and become contractors more interested in their programmes than their benefit to poor people.

Partners were concerned that funders should appreciate that the basis of local faith-based initiatives was a concern for the community rather than a professional opportunity:

- ‘NGOs pack up their work after programmes finish, churches will never leave the community.’ (*Bishop in Zambia*)
- ‘Churches don’t have programmes, they have church activities.’ (*Bishop in Zambia*)

These perceptions have led to widespread concern at the way in which proposals are developed and implemented, particularly that these processes exclude local church-based initiatives.

Concerns about the procedures for funding

Respondents complained that AIDS funding was being seen as a business opportunity, with people forming organisations simply to attract funding. Implementers were selected on the basis of written proposals and very limited visits. This meant that some with no relevant experience were paying professional proposal writers to prepare successful bids whilst those with established ability who were not marketing their work were not receiving funding. Similarly, organisations based near to the capital, or with connections, were viewed as more likely to receive funding, making it difficult for those in marginalised areas.

‘MAP requires people to be professionals so as to access its funds, but no capacity-building is given to the community-based organisations ... These organisations, especially churches, have accessibility to many people, but most of the leaders are not very technical and may not manage to write technical proposals and reports, unless their capacity has been built.’ (*Church worker in Rwanda*).

There was also concern that some proposals were at odds with the priorities of faith-based organisations, and in some contexts this may contribute to difficulties for faith-based organisations in accessing funding. Two examples were given of programmes that promoted condom distribution. Christian organisations believed that on its own this did not deal with the sense of powerlessness among young men that led to promiscuity and coerced sex.

However, their projects that included promotion of equitable gender relations and abstinence, as preventive interventions, were not able to access funding. As MAP deliberately does not hold viewpoints on the sensitive issue of condoms and abstinence, this illustrates how local interpretations rather than MAP may have important implications for FBOs.

In some cases, FBOs were concerned that processes to obtain funds are not working well because of problems associated with government involvement. This is perceived to lead to inefficiency, maladministration and a lack of transparency. In Malawi, eight out of nine respondents in a survey in 2004 had made applications but had given up due to delays and lack of response⁷ (see page 16). (However, there are recent indications that the NAC in Malawi is seeking to respond to the needs of CBOs including local faith-based initiatives, and that other church initiatives have received funding.) Some complained of too much 'red tape', with applications having to go through many tiers of approval. In some cases, decentralisation without checks and balances may be exploited to pursue partisan behaviour. For some, the reporting requirements were too complex so they had not received subsequent disbursements:

'World Bank and NGOs need to form a proposal format that community leaders/pastors can understand rather than technical forms that only other technical people working in offices can understand.' (*Church worker in Rwanda*)

Respondents were concerned as to how donors were measuring the proportion of resources that were reaching poorer communities, and about monitoring and evaluation procedures in general. This stemmed from perceptions that resources were spent on salaries and allowances and workshops in expensive hotels when it was not clear what was getting through to those at the grass roots who most need it. Several respondents mentioned that some of the top-level recipients of funding were not able to spend it, and then put pressure on FBOs to take and make use of it.

Overall, partners believe that local churches have an important contribution to make but that they are not being included, as they should.

The experience of faith-based HIV and AIDS programmes in Malawi⁷

In 2004, the Evangelical Association of Malawi collected information from 15 churches. For all the churches involved, the experience of applying to the NAC was described as an uphill struggle. Many chose to drop the application. Respondents cited many concerns:

- **The process to apply for funding is very complex and takes a long time.**
Of the 15 churches, eight had applied for NAC funding and had not been successful. Many spoke of sending proposals, getting feedback, sending more information and eventually giving up due to lack of response. Only one church had had their proposal approved but they were still waiting to receive funds.
- **There is a lack of information available about the funding process and requests for information from the NAC are not responded to promptly.**
Churches knew very little about the NAC proposal guidelines and other important information. They felt that churches and church organisations were rarely invited to participate in NAC information-sharing forums. Government ministries and NGOs were perceived to have more information than faith-based groups.
- **Lack of communication and collaboration among the churches.**
The few churches and church organisations that know about proposal guidelines and other important information could share this knowledge more widely with other churches.
- **Very few churches are able to meet the standard required in the NAC proposal format.**
The NAC proposal guidelines are seen as requiring very high standards of proposal writing that require effort and time that very few of the churches can afford. Traditionally, churches have requested financial support by writing a letter with problem details, suggested activities and the lump sum of money required. Many churches see this as a 'proposal'. Producing 'professional' proposals is not one of the strengths of the church, whereas responding to need at local level is. Despite committing to work with FBOs, NAC has not built into its support a component of capacity-building for community-level organisations. NAC is set up to work, support and collaborate with institutions that can already prove their capability.
- **Funding mechanisms at district level are not seen as open and transparent.**
In Malawi, umbrella bodies at district level have been set up to approve funding for district-level response. At present these umbrella bodies tend to be NGOs with the intention that these functions will be handed over to District Assemblies in two years. Churches perceive that priorities at district level are dependent on the values and sectoral strengths of the umbrella body. Secular umbrella bodies are perceived to have a negative attitude towards church programmes that do not include condom promotion. Whereas funding agreements are confirmed at national level, rejections may not be picked up there.

Monitoring and evaluation

There were two main areas of concern:

INDICATORS WERE LARGELY QUANTITATIVE ‘Results’, and hence disbursements, could be based upon achieving numeric targets rather than the quality responses which local faith-based initiatives pride themselves upon.

MONITORING AND EVALUATION SYSTEMS ARE INADEQUATE There is still little investment in comprehensive monitoring, evaluation and learning systems that would:

- capture the full range of progress, output and outcome indicators
- inform decisions of programme implementers, managers and policy makers
- direct the growth of programmes.

These would require full participation by beneficiaries, implementers, and the ‘system’ stakeholders (immediary agencies such as religious co-ordinating bodies, local and central arms of government, academic, research and training institutions etc), and hence, a degree of seeing and talking.

Overall, there was widespread concern that neither international funders nor national-level implementers really know what is happening, beyond having quantitative reports with little qualitative information, particularly about whether resources are reaching the poorest people. This means that there is no ‘feedback mechanism’ to influence programme planning and implementation, particularly in response to problems with disbursements. As indicated above, the World Bank largely shares this view.

Some respondents believed that the FBO community, especially international FBOs and strong national-level FBOs, should take some responsibility for ensuring that the activities of local faith-based initiatives are evaluated and the results disseminated. It was observed that in other domains of public health, such as control of malaria (eg: by impregnated mosquito nets) or TB (eg: by DOTS) there is already a strong literature on the effectiveness or otherwise of different social development and disease interventions.

The responsibilities of stronger FBOs

Several respondents recognised that the church community has to take more responsibility for enabling local faith-based initiatives to access support. Some were concerned that it was adopting a ‘victim mentality’ rather than using its resources to address issues. This could have several components:

Enabling local initiatives to access information and formulate proposals

There are often religious co-ordinating bodies or NGOs which are relatively well-positioned to access information, support local FBOs in formulating proposals, help them with negotiating bureaucracy and represent them to national-level institutions.

Support to development and functioning of inclusive networks and consortia

Through which local faith-based initiatives may come together for learning, shared experiences and joint proposals.

Better communication of what could be achieved

There is relatively little documentation and communication of the experiences of local faith-based initiatives. Furthermore, donors have a right to be assured that local faith-based initiatives do represent a good investment. There needs to be a more realistic assessment of what can be achieved and this requires investment in independent evaluation alongside programme monitoring.

Ways forward

The World Bank, and particularly MAP, recognises the critical contribution of local faith-based initiatives in responding to AIDS. Such local initiatives were usually started on a voluntary basis. Many now need external funding to meet deepening and expanding needs. Although MAP may demonstrate that it is funding a significant number of community-level sub-projects, this limited survey of Tearfund partners found very few who had accessed MAP-derived funding and many with reservations about trying. Many others contacted in the course of the study share the perception that in some countries resources are not reaching local initiatives, as they should. MAP has acknowledged the potential for this to happen. It has pioneered an approach that is enabling, extremely flexible, and open to innovation, decentralisation and calculated risks. It has held regional workshops to try to increase FBOs access to funding. Within country it expects to support capacity-building. This has extended to funding for FBO workshops.

The critical dimension seems to be the attitude of national government and its employees (the bureaucrats who should have turned warriors) to understanding the role of local faith-based initiatives and enabling support to reach them. The challenge facing the Bank is how to make the system work better in this regard when it requires that governments handle funds. Ironically, although MAP is far more active in recognising and supporting the role of FBOs, Tearfund partners appear to find it easier to access the Global Fund, which takes a 'balanced' perspective. This may be due to the relative ease of accessing funds via non-governmental recipients with the Global Fund. The interim review team⁹ recommended that governments should outsource the management of funds. Given the desperate situation with AIDS, there may also come a time soon when the 'extraordinary and exceptional' methods include finding alternative means to receive and disburse funds, other than through governments, as with the Global Fund.

However, there may well be a role for the 'faithful' – for those who give of themselves within local faith-based initiatives, and those with jobs in religious co-ordinating bodies and faith-based NGOs. Those with influence and resources have a responsibility to ensure that the case is made for supporting local faith-based initiatives, and that potential beneficiaries have the information, skills and 'voice' that they need.

Recommendations

Recommendations for international donors to MAP

MAP acknowledges weaknesses in monitoring and evaluation, especially in tracking how funds are being used at sub-national level, and their impact. This raises issues of accountability and effective fund management. International donors should insist that MAP reviews and strengthens its requirements for monitoring and evaluation.

Recommendations for MAP

MAP should continue to review and strengthen the implementation of monitoring and evaluation, particularly at sub-national level. It should be able to track what is happening with resources, and their impact. At present, it is not possible to realise the intention of 'learning by doing' as the systems are not delivering.

The attitude and practice of national government is often critical to the effective implementation of a MAP project. Given the desperate situation with HIV and AIDS, there may come a time when the 'extraordinary and exceptional' methods envisaged by MAP include finding alternative means to receive and disburse funds, other than through governments, as with the Global Fund in many countries.

Recommendations for National AIDS Councils

NACs should enable national-level design processes to include the perspectives of local faith-based initiatives:

- A significant proportion of NAC members should understand the realities of organisations working at community level including faith-based initiatives.
- The NAC should ensure that the process of preparing and evaluating a MAP proposal should allow for the participation of local faith-based initiatives, or those who speak for them.

Furthermore, the NAC needs to better understand how national-level proposals are currently working, and could work better, for those responding at community level, particularly through faith-based initiatives:

- This may involve improving monitoring and evaluation mechanisms.
- Changes in the model of implementation may be required.

NAC funding decisions need to be proactive – based upon needs, resources and constraints – as much as reacting to convincing proposals.

Recommendations for national-level FBOs and international FBOs

National-level FBOs need to provide strong national-level support to local faith-based initiatives by:

- developing skills and experience among local FBOs
- supporting evaluations and improving communication on what has been achieved

- developing institutional arrangements to facilitate effective access to funding from MAP
- speaking out where required, and appropriate, on implementation at national level, on the speed and nature of the response.

Recommendations for local faith-based initiatives

- Local faith-based initiatives should seek support to help with learning and to do what may not be appropriate for them to try to do.
- Local faith-based initiatives should seek to share their experience and be willing to learn from other, similar initiatives.

Footnotes

- 1 MAP's Generic Operations Manual recognises that: 'A declaration of war and turning bureaucrats into warriors are the best means of empowering the front line soldiers in implementing agencies in the public sector and civil society and those living in communities with the arms and ammunition to win the war.'
- 2 UNAIDS (2004) *AIDS epidemic update 2004*, www.unaids.org/wad2004/report_pdf.html
- 3 For more information, see Tearfund's corporate website: www.tearfund.org and its website dedicated to enabling learning from the work of Tearfund and its partners: www.tilz.info
- 4 Weaver R (2004) *Responding to children affected by HIV and AIDS. Using external support to strengthen community initiative and motivation*, Tearfund HIV/AIDS Briefing Paper 3, www.tearfund.org/webdocs/Website/Campaigning/Policy%20and%20research/AIDS_briefing_3_children_final.pdf
- 5 Foster G (2004) *Study of the response by faith-based organisations to orphans and vulnerable children*, UNICEF and World Conference of Religions for Peace, January 2004, www.wcrp.org
- 6 UNAIDS (2004) *UNAIDS Questions and Answers*, November 2004, www.unaids.org/en/resources/questions_answers.asp
- 7 Storch A (2005) *Filling the gaps: Churches and HIV and AIDS in Malawi*, Tearfund and Evangelical Association of Malawi briefing paper (Forthcoming)
- 8 Taylor N (2005) *Many clouds, little rain. The Global Fund and local faith-based responses to HIV and AIDS*, Tearfund HIV/AIDS Briefing Paper 4, www.tearfund.org/Campaigning/Policy+and+research/HIV+AIDS+policy+and+research.htm
- 9 World Bank (2004) *Interim Review of the Multi-country HIV/AIDS Program for Africa*, October 2004, www.worldbank.org/afr/aids/map/map_review.htm
- 10 *Personal communication* from World Bank ACTAfrica, February 6, 2005
- 11 World Bank (2004) *Turning bureaucrats into warriors. Preparing and implementing multi-sector HIV/AIDS programs in Africa*, Chapter 10, Civil Society Organisations
- 12 World Bank (2004) *Concept note for HIV/AIDS workshop for faith-based organisations and national AIDS councils*, Accra, Ghana, January 12–14, 2004
- 13 World Bank (2004) PADs are available from the CD *Turning bureaucrats into warriors. Preparing and implementing multi-sector HIV/AIDS programs in Africa*
- 14 *Correspondence* with World Bank ACTAfrica, December 2004
- 15 Webb D, D'Allesandro C (2004) *Perspectives on the World Bank Multi-country AIDS Program*, Save the Children UK, January 16, 2004

Notes

Tearfund HIV/AIDS Briefing Paper 5
The warriors and the faithful:
The World Bank MAP and local faith-based
initiatives in the fight against HIV and AIDS

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