policy brief | Volume 1, Issue 3

PROVIDING A FACE TO HIV AND AIDS IN KADUNA STATE THROUGH ADEQUATE FUNDING OF INTERVENTIONS

EXECUTIVE SUMMARY

Kaduna State Action Committee on AIDS was transformed into Kaduna State AIDS Control Agency in 2007 according it the statutory right to draw funds from government coffers to coordinate the HIV and AIDS response in the state.

HIV and AIDS response resourcing is highly donor driven with little support from the government, however government's commitment has not been matched by physical releases of funds, thereby posing a huge challenge in implementing the HIV and AIDS response in the state.

Gravely concerned about the impact of HIV and AIDS and the burden of the epidemic on the infected and affected people in Kaduna State. We especially wish to call upon the government of Kaduna State to promptly release the HIV and AIDS budgetary allocations as a matter of urgency to avert the impending doom and saving the lives of the people of Kaduna State.

OVERVIEW AND PROBLEM STATEMENT

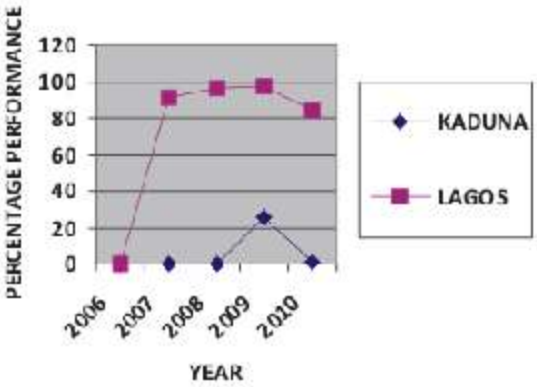
Kaduna State was amongst the first states in the country to commence HIV and AIDS response with the formation of the State Committee on HIV and AIDS in 1990 as an emergency response coordination mechanism. However, in 2000, directives from the Federal Government through the National Action Committee on HIV and AIDS (NACA) saw the setting up of the State Action Committee on AIDS (SACA) for the coordination of the HIV and AIDS response in the state. The coordinating body went through another transformation on the 25th of May, 2007 by becoming a fully fledged statutory agency through the State Law No. 6. This status accords the Kaduna State AIDS Control Agency (KADSACA) the statutory right of drawing funds from the government coffers. This means that the agency's funding is to be incorporated into the state budget and released therein for the coordination of the state response on HIV and AIDS.

It is quite interesting to note that resourcing of the state HIV and AIDS response depends on three structures: the World Bank International Development Assistance (IDA) credit, the State Government and donor funding. In 2002, Kaduna State SACA became credit worthy effectively accessing the IDA loan of the World Bank to resource the HIV and AIDS response. This is in addition to the substantial support from development partners like the Strengthening Nigeria's Response to HIV and AIDS (SNR), Columbia University Integrated Care Program (ICAP), Global HIV AIDS Imitative Nigeria (GHAIN), United Nations International Children Education Fund (UNICEF), Partnership for Transformation Health Systems (PATHS), Planned Parenthood Federation in Nigeria (PPFN), Enhancing Nigeria's Response to HIV and AIDS Program (ENR), among others. The state through its budgetary allocation contributes the remaining percent of the state response. A cursory look at the state allocation from 2007 to date as shown below indicates that there is a significant increase in budgetary provision but there is no concomitant correlation in release of budgeted funds.

KADUNA STATE BUDGET				
YEAR	CAPITAL ALLOCATION (MILLIONS) ₦	RECURRENT ALLOCATION (MILLIONS) ₦	TOTAL BUDGET ALLOCATION (MILLIONS) ₦	BUDGET PERFORMANCE
2007			165,000,000	0%
2008			175,000,000	0%
2009	259,000,000	153,000,000	412,000,000	0% Capital 26% Recurrent
2010	354,000,000	177,000,000	531,000,000	0% Capital 1% Recurrent

LAGOS STATE BUDGET ALLOCATION AND RELEASE			
Year	Total Budget Allocated	Total Budget Released (Millions) ₦	Budget Performance
2007	145,065,000.50	132,703,426.04	91.48%
2008	270,396,690.00	259,742,812.86	96.06%
2009	419,693,760.00	407,966,205.85	97.21%
2010	135,065,000.50 (recurrent)	132,703,426.04	84.26%

BUDGET PERFORMANCE: KADUNA VS LAGOS



A comparative analysis with Lagos state which has a prevalence rate of 3.8% shows that the rate is low compared to Kaduna's 7% and this might not be unrelated to the fact that Lagos state backs its commitment with prompt release of funds as shown in the tables.

In pursuance of its mandate through its institutional strengthening, The ENR program in June 2010 carried out an assessment on states and Federal funding of the HIV and AIDS program in Nigeria for seven (7) states; Lagos, kaduna, Nasarawa, Benue, Cross River, Ogun and Akwa Ibom and the Federal Capital Territory using a Budgetary Allocation and Analysis framework. The outcome of the funding analysis reveals that 80% of HIV and AIDS funding comes from development partners, and even the allocations by the government are not released and this cuts across all the seven states that were assessed. However, the recent World wide economic meltdown and structural adjustment policies of most donor countries is beginning to have a negative impact and reversing the hard-won development gains as evident in Kaduna. The recently concluded World Bank assessment of the state HIV and AIDs IDA funds shows that there is massive and

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POLICY POSITION

Based on this, we the members of the Policy and Advocacy Technical Working Group in the State, therefore recommend that the government as duty bearers makes HIV and AIDS one of its Development priority by promptly releasing the appropriated KADSACA budgetary allocation for a concerted HIV and AIDS response in the state, hence taking ownership of the State HIV and AIDS response. This will enable the state to take the responsibility of ensuring that it strategically works towards halting new infections of HIV, and reducing the impact of the virus on the lives and livelihood of the good people of Kaduna state through channelling of funds and deploying appropriate strategy that would achieve this.

This commitment should be demonstrated in an outlined reward and punishment mechanism that will guide the release and use of funds for HIV and AIDS interventions in the State. Such a system will hold the appropriate authorities, including the budget office, the relevant ministries and KADSACA accountable and liable for ensuring that this process works effectively.

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POLICY RECOMMENDATIONS

This brief therefore sets out actions required by all levels and arms of government in Kaduna State, civil society organisations and international partners as a matter of urgency.

Action by Government

Provide bold and resolute leadership in spearheading efforts in the State to combat HIV and AIDS establish a mechanism to monitor and ensure prompt release and efficient/effective use of budgetary allocations.

Increase in allocation and timely release of HIV and AIDS budget is imperative as this is an indicator of government's commitment to the HIV and AIDS response in the state.

More resources should be channelled to HIV and AIDS intervention that will yield the greatest reduction in HIV transmission, bearing in mind that success in accelerating access to treatment has not been matched by similar success in prevention.

Integrate the control of HIV/AIDS with broader efforts to combat poverty and food insecurity and fostering development, whilst recognising the urgency and exceptionality of the HIV and AIDS response

Maintain an unwavering commitment to deliver a comprehensive package of services for prevention, treatment, care and support for HIV and AIDS, including nutrition and linkages with reproductive health. Ensuring that no good plan go unfunded Such unwavering commitment can only be supported by prompt and timely release of adequate funding for KADSACA.

Action by House of Assembly

House Committee on Appropriation

- Increase appropriation fund for HIV and AIDS interventions
- Strengthen and improve oversight of the agency, line ministry and other relevant ministries in ensuring prompt release of budgeted funds.

Actions by Civil Society

Advocate for release of HIV and AIDS budget at both State and LGA levels.

Intensify their efforts more than

CONCLUSION

In this regard, we exhort the government, Commissioner of Finance and Economic planning to take all necessary actions to allocate and cause to be promptly released the required and adequate financial resources for the fight against HIV and AIDS in accordance with the commitments made by government.

By the Kaduna State Policy and Advocacy Technical Working Group (TWG)
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