

# THE MANAGER

CASE STUDY FOR TRAINING AND GROUP DISCUSSION

## Kitanga Province Takes On the HIV/AIDS Coordination Challenge

### Scenario

SEVERAL MONTHS AGO, the country's national AIDS committee created provincial-level units to coordinate provincial responses to the HIV/AIDS epidemic. The announcement was greeted with great expectations, but the results have been disappointing. In Kitanga Province, a meeting of representatives from the provincial offices of the ministries of health, education, and social welfare and from NGOs, religious organizations, and groups of people living with HIV/AIDS had taken place to initiate coordination. It was not a good experience. The meeting was characterized by turf battles, contention about who was doing what, and a general sense of frustration. No arrangements were made for a second meeting.

A member of the National AIDS Committee in charge of the decentralized response decided to take action to get the process moving again. He met with key provincial players in education, social welfare, and health. They arranged for a local facilitator to structure a participatory process to bring stakeholders together and align all players around a shared vision for a coordinated HIV/AIDS response for Kitanga Province.

It was the big day. The meeting was about to start. Some of the 30 participants were reading the day's agenda. Others were talking among themselves. Still others looked sleepy or bored, already slumped in their chairs. Most were sitting near people they already knew—the workers from religious organizations sat together, the people living with AIDS together, and the Ministry of

Health staff together. "I am pleased to see so many fine colleagues here today who are already working to uplift our province in light of the HIV/AIDS epidemic," began the Provincial Health Director. "You may remember our first coordination meeting, which led to much talk but little action." He heard a few chuckles. "For today, we have planned a different approach, and our success will depend on your full participation. Funding from national and international agencies for our future efforts will depend on the quality of the work you begin today." He paused. "Ngika Kalago, an experienced facilitator from our province, will facilitate. With her assistance, I feel certain that we will be able to develop a shared vision for our vital coordination work."

During the two intense days that followed, people worked in pairs, small groups, and plenary sessions to identify what an AIDS-free Kitanga might look like and the challenges they needed to understand and address. Ms. Kalago led the group through a visioning exercise in which people first drew their individual dreams about an AIDS-free Kitanga and then combined their drawings to arrive at a compelling picture of the vision they would commit themselves to creating. People worked in mixed groups, with Reverend Marcus, a conservative religious leader, working side by side with Ms. Mbatu, an activist who had turned her illness into a commitment to break taboos that were aiding the spread of HIV/AIDS. Sometimes people drifted into arguments about how to achieve the vision, but Ms. Kalago expertly reminded

them that the first order of business was to create a shared vision. When the group stood around the image of their combined vision, some people were deeply moved, and all agreed: “This is where we want to go together.”

On the second day, the group began to scan the current situation. People divided into factions, each with its own agenda, objectives, approaches, and philosophies. Whenever emotions flared, the facilitator reminded people of their vision: if they could not decide together where they were in relation to the vision, they could never begin moving forward. “Look at the image we created of staffed voluntary counseling and testing centers, well-stocked drug cabinets, frequent communication among the various parties, and families that have overcome the challenges of living with the disease,” said Ms. Nankeli, an NGO representative. “Our vision is about successful prevention, effective treatment, and compassionate care. How can we ensure that providers, policymakers, importers, regulators, funders and all the parts of the supply chain work in a coordinated fashion to achieve this vision?”

“That’s exactly why we have gathered,” replied the facilitator.

“Government bureaucracy causes endless delays and will derail any efforts to develop a coordinated response to the HIV/AIDS crisis,” continued Ms. Nankeli. “Regulations need to be simpler, so medications can move quickly into the provinces where they are needed.”

“But these regulations protect consumers from poor-quality products!” protested Dr. Antoine from the Ministry of Health.

“The real problems are lack of trained staff, laboratory equipment, and money, though I don’t think we can do much about all this at our level,” said Mr. Bulao, with a sigh that betrayed a feeling of powerlessness.

“It is OK that we are dreaming a bit and that this may seem like building a castle in the air,” said the facilitator quickly, hoping to discourage this sense of hopelessness. “By determining what the current situation is, we will be able to put a foundation under our castle and begin to build it.”

“She’s right,” said someone else, “we need to do our homework now, so we can prioritize our actions, or nothing will change.” Many people nodded their heads.

“Let’s agree that change is possible and there is much that we can do together to create the new reality we have sketched out,” said the facilitator firmly.

The group spent the rest of the day analyzing the challenges they faced. In mixed groups, people explored why it was hard for people with HIV/AIDS to admit their status, what kept health personnel from talking freely with their patients, and why laboratories were having a hard time keeping up with demand.

At the close of the two-day event, people’s spirits were high. They had gotten to know each other and worked hard on issues they cared about. They had moved past stereotypes about each other and discovered a shared commitment to action. “We are ready to face our challenges and decide together the best way forward from here,” said the Provincial Director, speaking for the group.

They set a date and an agenda for the next meeting, at which they planned to identify their points of interdependence and reach consensus on what functions would be best managed in common. Meanwhile, individual groups planned to continue to explore the current situation, collect missing data, and determine the common instruments needed to accomplish their goals.

### Discussion Questions

1. What made this attempt at coordination different from the first one? What leads to ownership? What is the role of conflict in such discussions?
2. What was done to encourage participation? Why is structure important for full participation? What often happens when stakeholders meet and the discussion is not structured?
3. Who appears to be in charge of the coordination process so far? What leadership issues and other issues will this group need to address to keep moving toward realizing its vision?

**QUESTION 1** What made this attempt at coordination different from the first one? What leads to ownership? What is the role of conflict in such discussions?

This coordination attempt differs from the first one because:

- one person took responsibility for moving the process forward in a coordinated way;
- a small group of key provincial players arranged for a local facilitator to lead a structured, participatory meeting with the goal of creating a coordinated force for action;
- the meeting engaged all participants in developing a shared vision;
- the meeting fostered relationships among members of groups that do not usually interact;
- working in small groups drew on the collective knowledge and experience of the group and discouraged individuals from dominating the discussion.

Factors that can lead to ownership include opportunities to:

- share viewpoints in a setting that is respectful and participatory;
- contribute to a vision and plan of action in a meaningful way;
- identify common challenges and approaches with others who will be involved in future collaboration;
- share or mobilize resources;
- be recognized for contributions.

As seen in the scenario, conflict in such discussions can serve to bring to the surface underlying emotions and concerns, thus allowing assumptions to be examined, concerns to be addressed, and areas of agreement to be identified. Conflict may best be handled

by maintaining a focus on the purpose at hand and on the elements about which everyone already agrees.

**QUESTION 2** What was done to encourage participation? Why is structure important for full participation? What often happens when diverse stakeholders meet and the discussion is not structured?

To encourage participation, the facilitator asked participants to work in pairs and small groups and to create individual, group, and plenary drawings that depicted the participants' dreams about an AIDS-free Kitanga.

Structure is important for full participation because differences in gender, hierarchy, education, and other factors can prevent individuals from speaking up or from respecting the contributions of those who are different from themselves. When the discussion is not structured, it can become unproductive, with a few individuals dominating the discussion while others remain silent, perhaps becoming disengaged and resentful. This situation can make it difficult to develop a realistic plan of action and can lead to lack of commitment to the resulting plan.

**QUESTION 3** Who appears to be in charge of the coordination process so far? What leadership issues and other issues will this group need to address to keep moving toward realizing its vision?

The person in charge of the national AIDS committee's decentralized response took a leadership role by meeting with key provincial players and working with them to craft a plan for developing a shared vision for HIV/AIDS coordination in the province.

At the meeting described in the scenario, the Provincial Health Director appears to be in charge because he opens and closes the two-day event. The facilitator, however, takes a strong leadership role, keeping the participants focused on the business at hand, helping

them manage conflict, and encouraging creative thinking and dreaming. Furthermore, the structure of the meeting, with pairs and small groups of participants working together, allows different people to take on leadership roles throughout the day. Thus, many of the participants are likely to have developed a sense of commitment to the vision.

Leadership of the coordination effort is a key issue that this group must address. It is important that a Provincial AIDS Coordinator be appointed soon. The coordinator should be skilled in relating pending decisions to the vision and in bringing disparate groups to consensus. It is unlikely that the Provincial Health Director would have time to lead the coordination process over the long term.

Other issues the group members need to understand and address to keep moving toward their vision include:

- **Interdependence.** How do their various interests fit together? Where are they aligned? Where do they conflict? In what areas can they eliminate duplication, support each other, share resources, and strengthen their response to the epidemic through coordination?

- **Communication.** Can they change common behaviors, attitudes, or meeting formats that impede progress? What are their communication needs related to planning, sharing information, and maintaining linkages? What will their communication mechanisms be?
- **Structural barriers.** Will they be able to establish policies and operating budgets, develop legal mandates, and clarify roles and responsibilities? What will their organizational structure for technical and financial coordination be? What will their management structure be?
- **Systems.** What are their system requirements for information, human resources, pharmaceutical management, and financial management? Will certain institutions be responsible for operations, supervision, quality control, and reporting?
- **Political relationships.** Can they establish trust among partners, develop a clear understanding of the costs and benefits of cooperation, and use their shared vision to guide their coordination in the long term?
- **Decision-making.** What role will the different partners play in making decisions? What will the group's decision-making process be?

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