



CONSTITUENCY AIDS CONTROL COMMITTEES

Introduction

In March 2003, President Mwai Kibaki launched the country's Total War on HIV/AIDS and subsequently formed a Cabinet Sub-Committee that he chairs, to evaluate the country's HIV/AIDS programmes. In their deliberations, the need to shift the HIV/AIDS approach was evident as it became that the most effective approach lies in the mobilization of communities in every corner of the country.

The committee's evaluation further revealed the need to broaden the focus of our programmes to include some important areas that have been left out which include the care for those orphaned by AIDS and the provision of drugs for those infected for these are critical aspects are critical in the continued fight against the spread of the disease. The community can effectively provide for these areas, for the community is the most strategically placed organ to take care of the affected and the infected in the society.

Following these revelations,

the Cabinet committee in consultation with other stakeholders decided to focus the country's war on AIDS on the community and thus called for the strengthening of the Constituency AIDS Control Committees to ensure that the community is adequately involved in the war against HIV/AIDS. Though the community has suffered the worst brunt of the AIDS pandemic, it is the most strategically placed organ to effectively fight the AIDS pandemic and no one can dispute its important role in the fight against HIV/AIDS. The launch of the Constituency AIDS Control Committees which took place on December 1st 2003, is therefore very important as it takes the war on AIDS to all communities in Kenya, by making the constituency the focal point in the war against HIV/AIDS. Following the CACCs launch, a committee is formed in every constituency in Kenya.

Goals of CACCs

To have total mobilization of communities in Kenya within each Constituency for active involvement in prevention of

new HIV infections, as well as providing care and support for the HIV/AIDS infected and affected people.

Objectives

To mobilize communities within the Constituency to:

- Reduce drastically the number of new people getting infected with HIV.
- Provide care and support the Orphans and other Vulnerable Children (OVC).
- Provide community and home-based care and support to those who are infected and affected especially widows and widowers including economically empowering them through income-generating activities.
- Promote the utilization of Voluntary Counseling and Testing (VCT) services linked to post-test clubs and treatment for those who are positive.
- Increase access to medicines to prevent Mother-to-Child transmission, for opportunistic infections, and to ARVs that prolong and improve quality of life.

Role of CACCs

Besides encouraging the community to generate proposals and approving them for funding, other CACC's mandate is to coordinate and manage HIV/AIDS activities in their respective constituencies. The CACC assists in setting up networks of stakeholders to implement HIV/AIDS epidemic response activities in the constituencies. The CACC supervises and monitors the implementation of projects by the funded organizations. The CACCs are also required to conduct community mobilization to respond to HIV/AIDS epidemic. In addition, the CACC is required to disseminate relevant policy and guidelines related to HIV/AIDS.

The composition of CACCs

The agreed composition of the AIDS Control Committees is as follows:

- The Chairman - elected among the members
- The Constituency AIDS Control Coordinator is the Secretary
- Multisectoral Divisional

Representatives, who are ex-official members as follows:

- Divisional District Officer(s)
- Public Health Officer
- Community Development Assistant
- Divisional Heads of Departments of the Ministries below: -
- Ministry of Education
- Ministry of Agriculture
- Ministry of Home Affairs (Children Officers)
- Private Sector Representative
- A representative from Faith Based Organization(s)
- Civil Society Representatives - one from each of the following:-
- Community Based /Non Governmental Organizations (CBOs/NGOs)
- People Living With HIV/AIDS (PLWHAs)
- Women representative - 3 people
- Youths' representative - 3 people
- Trade Union representative
- KNUT representative
- All Councilors

The Patron to the Committee is the sitting Member of Parliament. In order to streamline the operations of the formation of the CACCs, there is need for an Oversight Board.

The CACC Secretariat

Each Constituency has a Secretariat comprising of the following staff, who are seconded by the government:

- Constituency AIDS Control Coordinator
- Accounts Assistant
- Statistical/Clerk/Records Clerk
- Typist
- Support Staff

The government in consultation with the Oversight Board, in which the Member of Parliament is represented, does the placement of the CACC Secretariat Staff. The officers are paid their salaries by the government, and there is TOP UP ALLOWANCE from NACC as necessary.

The function of the CACC Secretariat as a group as well as the responsibilities of the CACC Coordinator are spelt out in the main document as per item above. The Committee Members sit at least once a month, and are paid Kshs.500/= to cover transport/sitting allowances per meeting.

DISTRICT TECHNICAL COMMITTEES

Introduction

Following the Government's focus of HIV/AIDS activities at the community level, the Cabinet Committee on HIV/AIDS recommended formation of District Technical Committees (DTCs) in March 2003 to provide technical backstopping to Constituency AIDS Control Committees (CACCs). This is in recognition of lack of adequate capacity of CACCs to coordinate, supervise and monitor HIV/AIDS activities at the community level. DTCs therefore play a key role in guiding CACCs in their operations to ensure effective implementation of HIV/AIDS activities at the community level by implementing agencies (NGOs, FBOs, CBOs and private sector). District Technical

Committees (DTCs) forms the technical arm of the District Development Committee (DDC) on HIV/AIDS matters. This ensures that HIV/AIDS is mainstreamed in the district development programs. The district heads of departments report on their sector-specific HIV/AIDS activities initiated by their sectors. The Committee takes the form of an expanded District Executive Committee (DEC) but to give it a multi-sectoral dimension with an all-inclusive membership, members of civil society and private sector are co-opted. DTCs meet monthly and report to the District Development Committee (DDC), which meets quarterly. District Development Officers (DDOs) report to NACC all HIV/AIDS issues in the district and liaise closely with all Heads of Departments

(Sub-ACUs) to compile multi-sectoral information on HIV/AIDS in their respective districts.

Roles and Responsibilities of DTCs

The functions of District Technical Committees are to:

- Provide technical support to CACCs, who in turn will support community initiatives.
- Operate as oversight Boards in formation and operationalization of CACCs.
- Coordinate implementation of HIV/AIDS activities in the district.
- Develop appropriate mechanisms for monitoring and evaluation of HIV/AIDS activities within the district.
- Conduct regular capacity needs assessment and capacity-build CACCs and NACC-funded CBOs.

- Disseminate Kenya Government HIV/AIDS Policies, Guidelines and Strategies to HIV/AIDS stakeholders.
- Hold HIV/AIDS stakeholders meetings to discuss HIV/AIDS priority areas and redirect resource allocation.
- Ensure timely reporting and accounting for funds disbursed by NACC for HIV/AIDS activities among HIV/AIDS implementing agencies in the district to facilitate experience and best practice sharing.
- Organize monthly meetings with all the CACCs operating in the district to share experiences.
- Take leadership role in prevention and advocacy against HIV/AIDS in the district.
- Ensure effective linkage of HIV/AIDS and other government policies and

programs such as poverty.

- Mobilize resources at district level to help fight the scourge.
- Ensure HIV/AIDS is mainstreamed in all sectors at district level
- Review and approve proposals whose budget falls within Kshs. 350,001 – 1.9m (US\$ 5001 – 25,000)

Composition of District Technical Committees

The composition of DTC is multi-sectoral with membership drawn from public sector, private sector and civil society. The criteria for selecting members from the private sector and civil society are gender and technical knowledge about HIV/AIDS. The membership is as follows: -

- District Commissioner (Chair)
- District Development Officer (Secretary)
- District Medical Officer of Health
- District Information Officer
- 2 Representatives of Civil Society (CBO/NGO)
- 1 Representative of Faith Based Organization (FBO)
- 1 Representative of People Living with HIV/AIDS (PLWHA)
- 2 Women representatives
- 1 Representative from Private Sector
- 1 Representative from the Youth organization
- All CACC Coordinators/Chairmen
- ACU coordinators at the district level will attend the DTC meetings as ex-official.

Each District Technical Committee has a membership of 12-15, however the membership is reviewed after every 2 years.