IN-COUNTRY MANAGEMENT STRUCTURES
OF THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA
AND
GOOD GOVERNANCE:
THE COUNTRY COORDINATING MECHANISM OF ZAMBIA

Author: Vasily Esenamanov
Supervisor: Dr. Kristina Jönsson
Abstract

Present day aid strategies and their effectiveness are subjected to fundamental reassessment. Major donors and international financial institutions are increasingly basing their aid and loans to the countries on the condition that recipient governments undertake reforms that ensure "good governance" of the allocated funds. Present study conducted in November and December 2007 in Zambia was aimed at analyzing the efforts of the Global Fund to fight AIDS, Tuberculosis and Malaria, the predominant international financier of tuberculosis and malaria and one of the largest funding organizations for HIV/AIDS programs, at strengthening good governance of the Global Fund’s grant in Zambia, the largest per capita recipient of the Global Fund and the “star performer” as referred by the Global Fund itself. The study analyzed the Country Coordinating Mechanism of Zambia (CCM/Z), the in-country management structure, which bears responsibility for the grant proposals preparation and the implementation process oversight, from the good governance concept perspective based on the model by the World Bank in order to assess the CCM/Z compliance with the concept. With qualitative interviews with the key informants and review of the relevant literature and documentation as main data collection instruments, the study concluded that CCM/Z experiences significant problems complying with the good governance principles.

Keywords: Country Coordinating Mechanism, CCM, good governance, The Global Fund to fight AIDS, Tuberculosis and Malaria, Zambia
Acknowledgements

I would like to thank all those who have supported me during the preparation phase and during the course of the research by contributing with their technical expertise, their professional and personal time, and their shared will to improve governance of the donor funds aimed at the fight with three devastating diseases: HIV/AIDS, Tuberculosis and Malaria.

In particular, my sincere appreciation goes to Dr. Kristina Jönsson, lecturer, researcher and currently also Director of Studies at the Center for East and Southeast Asian Studies at Lund University, who provided me with her guidance and advice during the writing process, to Dr. Eric Sattin, Treatment, Care & Support Adviser at the National AIDS Council of Zambia for his cooperation and support during entire course of my study, to Mr. Dominique Johnson, Programme Officer for the Southern Africa Cluster at the Global Fund to fight AIDS, Tuberculosis and Malaria and Dr. Edward Greene, the Global Fund Portfolio Manager for the Southern Africa for their support in establishing contact with the Country Coordinating Mechanism of Zambia and the National AIDS Council, and to all members of the Country Coordinating Mechanism of Zambia and other key people who expressed their willingness to participate in the study.

Special thanks go to the Swedish International Development and Cooperation Agency (SIDA) for their financial support during the research, thus making this study possible.
# Table of Contents

1. INTRODUCTION .................................................................................................................. 5  
   1.1 Good governance and development assistance .............................................................. 5  
   1.2 Purpose of the research .................................................................................................. 6  
   1.3 Rationale of the study .................................................................................................... 7  
   1.4 Research questions ........................................................................................................ 8  

2. CONCEPTUAL FRAMEWORK: Good Governance ........................................................... 9  
   2.1 The origins of the concept .............................................................................................. 9  
   2.2 Criticisms of the concept ............................................................................................. 11  
   2.2.1 Lack of precise and universal definition .................................................................. 11  
   2.2.2 Contradictory nature of the concept ......................................................................... 12  
   a) Western-developed “blueprint” ................................................................................. 12  
   b) Form of Conditionality ................................................................................................. 13  
   2.3 Operationalization of good governance concept .......................................................... 14  
   2.3.1 Good governance by the World Bank ...................................................................... 14  
   2.3.2 Criticisms of the World Bank’s definition ................................................................. 15  
   2.3.3 Alternative good governance concept used in the study ........................................... 16  

3. BACKGROUND INFORMATION FOR THE STUDY ..................................................... 18  
   3.1 The Global Fund and its in-country management structures .......................................... 18  
   3.1.1 Purpose and nature of the Global Fund .................................................................... 18  
   3.1.2 Country Coordinating Mechanisms (CCMs) ............................................................. 19  
   3.1.3 Role of CCMs .......................................................................................................... 20  
   3.1.4 Global Fund’s policies and guidelines on CCMs ......................................................... 22  
   3.1.5 The Global Fund and the good governance concept ............................................... 24  
   3.2 Zambia and HIV/AIDS, Tuberculosis and Malaria ........................................................ 24  

4. RESEARCH METHODOLOGY ......................................................................................... 26  
   4.1 Case study ....................................................................................................................... 26  
   4.2 Main data collection instruments .................................................................................. 27  
   4.2.1 Analysis of internal documentation ......................................................................... 27  
   4.2.2 Qualitative interviewing ............................................................................................ 27  
   a) Internal informants ....................................................................................................... 29  
   b) External informants ....................................................................................................... 29  
   4.2.3 Questioning techniques ............................................................................................ 30  
   4.3 Specifics of working with the informants ....................................................................... 30  
   4.4 Ethical considerations .................................................................................................... 31  
   4.5 Reliability and validity of the selected methods ............................................................. 31  

5. ANALYSIS: GOOD GOVERNANCE AND COUNTRY COORDINATING MECHANISMS .......................................................................................................................... 33  
   5.1 Previous studies on CCMs .............................................................................................. 33  
   5.2 Good Governance and the Country Coordinating Mechanism of Zambia ................... 37  

6. CONCLUSION .................................................................................................................... 52  

References ................................................................................................................................ 54  

Appendix 1: STANDARD INTERVIEW GUIDE ................................................................... 61
1. INTRODUCTION

1.1 Good governance and development assistance

Present day aid strategies and their effectiveness are subjected to fundamental reassessment. In recent years, confronted with declining aid budgets and increased scrutiny by civil society, the international development organizations have given greater consideration to the pervasive effects of mismanagement and endemic corruption (Santiso, 2001: 4). As a result, driven by the concerns over the effectiveness of development assistance, major donor organizations and international financial institutions have significantly stretched their policy frontiers by introducing “good governance” as a core element of their development strategies (Santiso, 2001: 3). There is a prevailing view among donors that the quality of governance at various levels in developing countries is critical to the achievements of the Millennium Development Goals (Unsworth, 2005: 2). The wide array of issues under “governance” occupies center stage in the development debate and the agenda of the international development organizations and international financial institutions, and most of the large development organizations include governance as a cross-cutting theme that stretches across virtually all the thematic areas of their work. There has been a great number of projects launched worldwide, covering a broad and ambitious range of interventions touching on virtually every aspect of the public sector, either aimed at improvement of governance at various levels and/or including it as one of the components (Unsworth, 2005: 2).

In recent years, the strengthening of governance in recipient countries has become not just an objective of the development assistance as it began, but also a condition for a country to be qualified to be a recipient of the development assistance (Santiso, 2001: 156). Major donors and international financial institutions are increasingly basing their aid and loans to the countries on the condition that recipient governments undertake reforms that ensure "good governance" of the disbursed funds. However, including good governance as a requirement for the country in order to qualify for foreign aid represents a challenge for development institutions (Santiso 2001: 159). It is the right time to ask whether instruments used by the donors to ensure good governance in the recipient countries are effective and good governance can be promoted by an outsider through financial incentives.
1.2 Purpose of the research

Present study sets out the aim to examine the efforts of the Global Fund to fight AIDS, Tuberculosis and Malaria – which aspires to be the world's largest fund-raising operation and the world's largest grant-making operation, according to the Global Fund’s main independent watchdog organization (Aidspan, 2008) – at strengthening good governance of funds disbursed to the recipient country. In its activities the Global Fund relies on the set of guiding principles that deal with the matters of governance believing that this will ensure that the monies will reach those for whom it is intended in a most effective way. As a pre-condition to be eligible for funding, the Global Fund requires a recipient country to set up Country Coordinating Mechanisms (CCM), the country-level management structures that occupy central place in the Global Fund’s aid delivery and implementation system. CCMs are bearing responsibility for development and submission of the national proposals for funding and oversight of the process during the implementation of the received funding.

Taking Southern-African country of Zambia – the largest per capita recipient of the Global Fund and “the star performer” as referred to by the Global Fund itself (Feachem and Sabot, 2006) – as a case study, the study examines its Country Coordinating Mechanism from the perspective the good governance concept. The goal of the present study is to assess whether the Country Coordinating Mechanism in Zambia (CCM/Z), when analyzed using the good governance concept, corresponds to the standards set out by the good governance concept and therefore is an adequate approach for the Global Fund to ensure good governance of its grants.

In the context of general preoccupation of the donors with good governance in the aid recipient countries, the approach used in the study is especially appropriate. Findings of the study and conclusions derived from it will hopefully serve as additional case study complementing the pool of the live evidence on the CCMs that the donor community currently has in operation. In addition, since the study is analyzing application of good governance concept on the example of one of the largest donors, it may be useful for the donor organizations, which have good governance as a pre-condition to qualify for aid. In this sense the study helps to advance the theory and clarify concepts (Ragin, 1994: 84, 85, 88).
1.3 Rationale of the study

The importance and timeliness of this study can be attributed to a number of reasons. HIV/AIDS, Tuberculosis and Malaria kills millions across the globe every year, with most mortalities occurring in low income countries that do not have financial capacity to support national programmes aimed at combating these diseases by themselves, greatly relying on foreign financial assistance. Well-functioning structures for donor aid management are crucial in order to halt and reverse the HIV/AIDS epidemic and incidence of the three other diseases. However, the systems of foreign aid delivery have received numerous criticisms by international development experts for its poor design and low effectiveness (Grant and Nijman, 1998; Lancaster, 1999). Other often encountered critiques include poor coordination (Lancaster, 1999: 60) and lack of understanding of local conditions and culture (Grant and Nijman, 1998: 193).

As an attempt to ensure better aid delivery, good governance nowadays is actively emphasized on by the donors, including the Global Fund to fight AIDS, TB and Malaria, as visible through the requirements that the Fund sets out before the countries in order to qualify for funding. Funding possibilities provided by the Global Fund to fight AIDS, Tuberculosis and Malaria are of crucial importance for the countries suffering from the three epidemics. There are several important factors that underline the Global Fund’s significance. For tuberculosis and malaria, the Global Fund is the predominant international financer, having provided in average approximately two-thirds of total international funding for each. For HIV/AIDS, the Global Fund provides in average one-fifth of total international funding available. Alongside the World Bank and the President’s Emergency Plan for AIDS Relief, the Global Fund is one of the three largest international funding organizations for HIV/AIDS programs (The Global Fund, 2006c).

The Gates Foundation, being itself one of the largest private donors for HIV/AIDS, called the fund "one of the most important health initiatives in the world" (The Register, August 2006). Unlike some other large donors, its funding is officially available to every country. According to the Fund’s most recent Guidelines for Proposals (The Global Fund, 2008a), any country can submit the proposal to the Fund and the funding decision will be taken largely based on the combination country’s needs and income criteria. Additionally, according to the Fund’s Framework Document (2007b), the Global Fund does not get involved in designing
programmes that it supports, leaving this function entirely to the recipient country and does not follow set strategy unlike some other donors. These characteristics make the Global Fund valuable and in many cases one-of-a-kind opportunity for low-income countries affected by the three diseases to receive additional financial resources to contribute to the national fight against HIV/AIDS, tuberculosis and malaria.

Effective management mechanisms within the recipient countries are crucial in order to ensure that the aid provided by the Global Fund is implemented in a most effective and efficient way. Assessment of such management mechanisms is important to identify weaknesses in the approach and the structure to develop further actions aimed at the improvement. Systematic analysis of implementation of good governance principles on actual cases is important to develop better understanding of practical constraints that the requirements application might face in the field.

The present study is focusing on Zambia – the Global Fund’s “star performer”, according to the Global Fund itself, and the largest per capita recipient of the Global Fund. Identifying the problems that the Global Fund’s leading recipient country is facing in application of the requirements aimed at ensuring good governance might reveal general problems that other and less successful funding recipients are facing.

1.4 Research questions

In connection with the purpose of the research, a set of the research questions was identified that the present study is aiming at finding answers to:

- To what extent does the Country Coordinating Mechanism of Zambia (CCM/Z) comply with the standards set by the good governance concept based on the World Bank’s definition?
- What are the problematic areas in the structure and functioning of the CCM/Z, when analyzed according to the components of the good governance concept?
2. CONCEPTUAL FRAMEWORK: Good Governance

2.1 The origins of the concept

Since the current work takes the good governance concept as the main core of the study, it is important to talk about the origins of the concept and the developments around it, including its evolution, necessary to understand the current discourse. According to Martin Doornbos (2003: 1) who discussed the evolution of the good governance concept, good governance became prominent in international aid circles around 1989 or 1990. The introduction of the concept in the development agenda initially was underpinned by the growing concerns of the donor organizations over the effectiveness of aid whose ultimate aim is to reduce poverty and human suffering. Declining budgets and increasing scrutiny by the civil society resulted in international development organizations paying greater attention to the harmful effects of mismanagement and omnipresent corruption (Doornbos, 2003: 3). As Carlos Santiso discusses in his work on good governance and aid effectiveness (2001: 5), the transition from governance to good governance signifies normative dimension addressing the quality of governance rather than presence of the necessary governing mechanisms. In other words, the term ‘good governance’ shares similarities with democratic political system, with lesser emphasis on formal organizational structures in favor of how the structures actually work (Unsworth, 2005: 5).

The term “good governance” per se first appeared in 1989 in the report on Sub-Saharan Africa published by the World Bank, which characterized the crisis in the region as a “crisis of governance” (World Bank, 1989). Back then this represented important departure point from previous policy, fueled largely by the experience in Africa, as prior to that aid agencies and other development organizations had not approached aid-related relationships with the recipient counterparts in terms of good governance criteria. Furthermore, the World Bank’s concern about governance has changed previous division of labor between the UN agencies and the international financial institutions, both beginning to include good governance on their agenda. (Santiso, 2001: 4). Since then major donors and international financial institutions have been increasingly attaching the condition of reforms that ensure "good governance" to their grants and loans.

Speaking of historical determinants, there are several circumstances that framed this change. As major political factors that can be mentioned as the initiating factors is democracy-
building movement that took off after the end of the Cold War and such epoch-marking events as the collapse of the Soviet Union and political opening in Eastern Europe, former Soviet territory and many parts of the developing world. It was accompanied by the escalating support for civil society, connected both with democracy promotion and efforts to empower poor people and encourage their participation in design and implementation of the projects (Unsworth, 2005: 4). However, another reason behind its introduction in donor agenda is the continuing lack of effectiveness of aid, poor commitment to reform of recipient governments and the persistent systemic corruption in aid recipient countries. There was also growing concern of the donors over weak administrative capacity and lack of ‘political will’ slowing down programmes aimed at poverty reduction, especially in countries with high aid dependency and large international debt (Ibid).

All these factors were propped by the increasing focus on the linkages between institutions and development and emphasis on ‘ownership’ of reforms by the aid recipient country and supported by the growing recognition of donors that “externally imposed conditionality was a very defective instrument in achieving it” (Killick, 1998 referred to in Unsworth, 2005: 4).

Towards the end of the 1990s, the international donor community raised concerns that were based on the experience in developing countries over the failure of the development strategies to take into account political and institutional factors (Unsworth, 2005: 4). The Target Strategy Papers published by the United Kingdom’s Department for International Development (DFID) during 1999-2000 [available in the online publications archive accessible from www.dfid.gov.uk] well reflect these trends (Ibid).

Prior to these events, aid agencies and other development institutions had not approached ‘donor-recipient country’ relations with the good governance criteria in mind. Neither had the term ‘governance’ occupied central place in the vocabulary of international community, civil society organizations, and governmental institutions (Unsworth, 2005: 3). For a long time after its mainstreaming and acceptance within the large development community, the word was “primarily carrying legalistic connotations, as in respect to bodies having boards of governors whose institutional role required a designation that was more grand than “administration”, less business-like than “management”, and suggested they handled their political concerns in a discreet but firm manner” (Doornbos, 2003: 1).
2.2 Criticisms of the concept

Present work takes donor-developed concept of good governance as analytical framework and does not cover the academic stream of writing on governance, on which a substantial body of literature has been developed (Hyden and Bratton, 1992; Leftwich, 1994: 363-86). It is important to mention, however, that the academic stream, as Martin Doornbos is discussing (2003: 3), is aiming at developing better understanding of different patterns in which power relations are structured in different contexts, focusing on different modes of interaction of the state and civil society. In contrast, discourse over good governance concept created by the donors departs from the single rather general definition of good governance in use by a specific donor organization and demands the recipient countries comply with it (Doornbos, 2003: 6). An academic discourse, as a clear distinction to the donor discourse, is based on the principle of cultural sensitivity, takes into consideration the historic-cultural variable as its point of departure and identifies advantages and weaknesses of different modes of governance in different contexts (Smith, 2007: 28 referred to in Doornbos, 2003: 3)).

2.2.1 Lack of precise and universal definition

Criticisms of the concept as used by the donor organizations appear virtually in every critical pieces of writing on this topic. First of all, lack of clarity of the concept’s definition has been widely criticized (Santiso, 2001; Unsworth, 2005; Nanda, 2006; Kuotsai, 2007; Smith, 2007). The obvious advantage of the concept’s use according to Goran Hyden (1992 quoted in Doornbos, 2003: 3), as well as its undisputable weakness, is that “it does not specify the locus of actual decision-making, which could be within the state, within an international organization or within any other structural context”. Since its first appearance in development discourse in 1989, the term "good governance" introduced by the World Bank was mainstreamed, heading the list of concerns of aid agencies, government researchers and the media. The mainstreaming resulted in the concept being fragmented, leading to multiple understandings of the concept, as it originated within neo-liberal economic development paradigm supported by the World Bank (Santiso, 2001: 4). A multitude of definitions, greatly differing in scope, rationale and objectives, have been created, which has caused an increasing confusion regarding the components and the actual scope of the concept (Nanda, 2006: 270). Donor organizations do not agree on measurable indicators to the point when the good governance is achieved. (Unsworth, 2005: 2). As well there is no single working theory that “would link inputs with outputs and higher-level objectives” (Unsworth, 2005: 2). Donors approach the concept from different perspectives and with varying objectives: democracy
builders see this as the ultimate goal, while others pursue better governance as means to promote growth, fight poverty or to counter human security risks faced by the states in transition (Unsworth, 2005: 2; Smith, 2007: 7). “Alarming simplicity of the definition, its open-ended quality, general vagueness, and obvious lack of specificity have generated a great deal of searching and debate on its actual meaning and idea, resulting in numerous efforts to adapt it and use it in particular ways” (Ahrens, 1999 in Hermes and Salveda, 1999, referred to by Doornbos, 2005: 3). Undoubtedly, even without careful analysis of the concept, it is clear that these factors do hinder the usability of the concept.

2.2.2 Contradictory nature of the concept

Lack of clarity is one of the often discussed criticisms of the good governance concept. Besides, literature review points out few other contradictory issues connected with the very nature of the concept, compliance with which donor organizations require from the recipient countries.

a) Western-developed “blueprint”

Firstly, the universality of the standards of good governance that was designed by the Western donor community is questioned. Main criticism of the concept is that the standards of good governance are conceived within socio-cultural and political contexts that are quite different from those where the concept is being applied (Doornbos, 2003: 5). It is argued that instead of being derived from a rich field of political anthropology or comparative political science, the concept has a form of a blueprint reflecting the way donor organizations perceive and respond to the world, the regimes, political systems and existing problems (Doornbos, 2005: 7). However, what one with own background and experience considers positive may be considered negative by another.

Moreover, as Martin Doornbos points out, “comparative judgments are almost inevitably about form rather than substance and practice”, or about presence of necessary elements rather than quality and meaningfulness of these elements (Doornbos, 2003: 5). The same combination of elements may function well or poorly in different contexts. If standards of good governance created and emphasized on by the donors were more fully elaborated and insisted upon, it would certainly imply an imposition of Western-developed standards of proper behavior in non-Western politico-cultural contexts (Martin, 1992: 4 referred to by Doornbos, 2003: 7).
b) Form of conditionality

A number of researchers have argued that good governance concept is another form of conditionality imposed by the donors onto the aid recipient state. Conditionality is defined as “a mutual arrangement by which a government takes, or promises to take, certain policy-level actions, in support of which an international financial institution or other agency will provide specified amounts of financial assistance” (Killick, 1998: 6 quoted in Santiso, 2001: 8) and represents an attempt of the donors to use aid as an incentive for developing countries to undertake reform of their policies and institutions. In case of the Global Fund, although not using the term conditionality in any of its official documents and guiding papers as such, it is in the requirement to set up an additional body in accordance with specific guidelines. On one hand, the Global Fund advocates for national ownership and country driven processes; on the other hand, it creates additional structures and leaves the country with no choice other than to rethink its decision to submit its application. Although aid without some sort of conditionality is politically impossible, as donor organizations must be account for the money spent to the donor countries, which in their turn must account to their taxpayers, the principle of conditionality is open to criticism as to the way it is applied and its ultimate effectiveness in achieving its intended objectives (Santiso, 2001: 8).

It is widely recognized that conditionality fails to be an effective means to achieve the desired objectives and sustain policy reform (Santiso, 2001: 8). “Aid is only effective in promoting positive developments in good policy, and on the whole, it has not succeeded in leveraging good policies”, write Catherine Gwin and Joan Nelson (1997). In a similar way, Tony Killick (1998 quoted in Santiso, 2001: 8) refutes the belief that aid connected to conditionality can “buy better policies”, at least in a sustainable manner, and therefore secure effective governance institutions. He writes that “the failings of aid conditionality reside in its inability “to create an incentive system sufficient to induce recipient governments to implement the reforms they otherwise would not undertake” (Killick, 1998: 163). As Carlos Santiso summarizes (2001: 8), “in general case conditionality is not a credible commitment mechanism”, and therefore is not capable to substitute or develop domestic ownership and real commitment required for the effective policy reform to take place.

Nevertheless, the concept is still there, and it has gained a key function by virtue of its capacity all at once to draw attention to a whole range of often largely unspecified issues concerning processes of public policy-making and authority structures. In that sense it has
appealed to the imagination of analysts as well as practitioners, and become a focal point for intellectual and policy discourses. As a result of widespread use of good governance by many multilateral and bilateral donor agencies and NGOs “pledging their adherence to it and projecting it onto their target groups” the use of good governance term in some ways “has become as common in remote districts of African countries as it is in Washington, DC or other Western European capitals” (Doornbos, 2003: 7). Good governance can be often heard in official speeches, discussions at the seminars and workshops for civil servants and NGO staff (Ibid).

Today, the term “good governance” is increasingly used in modern development discourse despite its boundaries remain uncertain. Aid practitioners and development thinkers have not yet been able to produce clear and operational definition of the concept and there has hardly been a consensus about its meaning and less and less of a common idea as to how it could be applied more concretely. Achievement of the Millennium Development Goals, as donors tend to believe, largely depends on the quality of governance in developing countries (Unsworth, 2005: 2, 8). Partially, due to this fact major donors and international financial institutions are increasingly basing their aid and loans to the countries on the condition that recipient government undertakes reforms that ensure "good governance", which has become a reference point in donor-recipient relations and a pre-condition to qualify for aid (Doornbos, 2003: 1-2).

2.3 Operationalization of good governance concept

2.3.1 Good governance by the World Bank

Since there is no universal definition of good governance that donor community has agreed upon, original definition developed by the World Bank will be taken as the main core around which the analytical discussion will be structured in the present work. Hiboux (2003: 3) writes that the World Bank has significantly shaped development thinking and “has acquired a quasi-monopoly on institutional knowledge in the field of economic resource management”, and since the Global Fund is a funding rather than implementing agency (The Global Fund, 2005b), it is assumed that the World Bank’s definition appears to be the most appropriate for the analytical purpose.

According to the World Bank, governance refers to the exercise of the power of
the state in managing a country’s social and economic resources, as well as other related mechanisms for public accountability, rule of law, transparency, and citizen participation (World Bank, 1991, 1992, 1994, 2000). The World Bank researchers (Kaufmann, Kraay and Zoido-Lobaton, 1999) distinguish four main elements of good governance:

1. **Accountability** (i.e., officials being answerable for their decisions and actions to the represented community),
2. **Participation** (i.e., active involvement of all the officials in the decision-making process),
3. **Predictability** (i.e., legal environment being conducive to developmental purpose, existence of rules, regulation, and working procedures), and
4. **Transparency** (i.e., the availability of information regarding decision-making process to the public and the clarification of the rules, regulations, and decisions)

**2.3.2 Criticisms of the World Bank’s definition**

Good governance concept utilized by the World Bank has been subject to criticism of the researchers. While clearly recognizing the importance of the political dimension of governance, the Bank interprets the concept rather restrictively, with the aspect of whether the government is legitimate or not falling outside the bank’s mandate. In fact, the Bank’s founding charter prohibits it from taking into account political considerations when designing aid programs (Santiso, 2001: 4). As a result, it focuses on economic dimension of good governance, which has been made synonymous with sound development management (Santiso, 2001: 5). Morten Boas (2001, quoted in Santiso, 2001: 6) writes that “governance is a difficult concept for the multilateral development banks that do not want to be seen as political and have since their establishment advocated a doctrine of political neutrality. They have embraced the functionalist logic that technical and economic questions can be separated from politics”.

However, it is important to note that in practice the World Bank, despite of the legal limitations of its mandate, struggles to separate the economic and political aspects of good governance. It was back in 1991 when the Bank recognized that the reasons for ineffective development activity are “sometimes attributable to weak institutions, lack of an adequate legal framework, damaging discretionary interventions, uncertain and variable policy frameworks and a closed decision-making process which increases risks of corruption and waste”(World Bank, 1991: i quoted in Santiso, 2001: 6). The International Monetary Fund,
another member of the Bretton Woods family of financial donor institutions, experiences the similar tension between the economic and political aspects of good governance, as discussed by James (1998) and recognized by the IMF (1997) (Santiso, 2001: 6)

2.3.3 Alternative good governance concept used in the study

To compensate for the components that the World Bank’s definition is criticized for and to broaden the scope of the analysis, the Bank’s definition was supplemented with the good governance components borrowed from the definitions in operation by the Asian Development Bank (1995: 3-4), Organization for Economic Co-operation and Development (2005), and the United Nations Economic and Social Commission for Asia and the Pacific (accessed in 2007) that identify quality dimension of governance. It is assumed that sources from different parts of the world, and therefore different politico-cultural contexts will balance the views in terms of geographical origins and diminish the geographical bias [as the concept has been widely criticized for reflecting “Western” values]. These components are:

(5) Effectiveness (the processes and institutions produce the intended results that meet the needs of the society),

(6) Efficiency (i.e., the processes and institutions produce results that meet the needs of the society with the best possible use of resources at their disposal),

(7) Equitability (i.e., all officials’ voices in the decision-making process are equal and capable of influencing the decision-making outcomes; the officials feel free to openly express their views),

(8) Inclusiveness (i.e., governing body should include representatives of all the social groups affected by the decisions taken within).

Eight characteristics of good governance outlined above are used in the present study as the main analytical framework to assess the Country Coordinating Mechanism of Zambia (CCM/Z), the way of the Global Fund to ensure good governance of its funds in the recipient country, in order to assess whether the CCM/Z reflects the principles of good governance in its structure and functioning.
Figure 1: Good Governance Model based on the World Bank’s definition*

*Octagonal shape is borrowed from the good governance concept by UNESCAP.

**NB:** Elements in blue are part of the original definition by the World Bank, while elements in black are the added elements borrowed from the definitions by other donor organizations (ADB, OECD, and UNESCAP).
3. BACKGROUND INFORMATION FOR THE STUDY

3.1 The Global Fund and its in-country management structures

3.1.1 Purpose and nature of the Global Fund

The Global Fund to fight AIDS, Tuberculosis and Malaria was created in 2002 as an initiative of the ex-Secretary-General Kofi Annan and G-8 leaders with the purpose to substantially increase donor resources available for the poorer countries to fight three of the world's most devastating diseases (Moghalu, 2006). The emergence of the Global Fund was laid by Annan’s following statement:

"The war on AIDS will not be won without a war chest, of a size far beyond what is available so far. I propose the creation of a Global Fund, dedicated to the battle against HIV/AIDS and other infectious diseases. This fund must be structured in such a way as to ensure that it responds to the needs of the affected countries and people. And it must be able to count on the advice of the best experts in the world - whether they are found in the United Nations system, in governments, in civil society organizations, or among those living with HIV/AIDS or directly affected by it". (Moghalu, 2006).

Since its creation through 2008 the Global Fund has attracted US$ 10.4 billion in financing and as of March 2008 has committed US$ 10.1 billion to support more than 450 programs in 136 countries worldwide (The Global Fund, 2007c). Today the Global Fund to Fight AIDS, TB and Malaria aspires to be the foremost mechanism at the international community's disposal to tackle three of the most devastating diseases afflicting our world today. To date, the Fund has reported that it has saved at least 1.8 million lives through antiretroviral treatment, has covered 62 million people with voluntary counseling and HIV testing services, and supported more than 1 million orphans through medical services, sexual education and community care. Within its TB component, its funds helped to detect 5 million additional cases of infectious tuberculosis, cure 3 million people through the internationally approved DOTS treatment strategy, 24,000 new treatment cases of multi-drug resistant tuberculosis were executed. Within Malaria component, the Global Fund financed 109 million bed nets to protect families from transmission of malaria, thus becoming the largest financier of
insecticide-treated bed nets in the world, and delivered 264 million artemisinin-based combination drug treatments for drug resistant malaria\(^1\) (The Global Fund’s official website).

The Global Fund, however, is not just standing out due to the impressive numbers of its reported achievements. International donor community agrees that there is the scope of innovations that the Global Fund represents in international development and international aid delivery (Moghalu, 2006). First of all, the very institutional design of the Fund as an organization is unprecedented - a public-private partnership governance structure, with national governments, non-governmental organizations, donors, and private companies seating at the same decision making table with the same voting rights, and developing and donor countries have identical voting powers and no veto power, a big contrast to the weighted voting rights in accordance with economic strength that governs the Bretton Woods financial institutions, such as World Bank and the International Monetary Fund (Moghalu, 2006). Even though true partnership between the components may be subject to skepticism, the organizational design that the Global Fund formally put in place makes it quite unique.

In addition to the public-private nature of the Global Fund, it has adopted several other innovative approaches to aid delivery. One of these is of cardinal importance within its aid delivery mechanism. It is, as the Global Fund calls it, “local ownership” of the programs that the Fund finances. The Fund’s Framework Document (2007b: 5) states that “The Fund will base its work on programs that reflect national ownership and respect country partnership-led formulation and implementation processes”. One of the unique, and therefore controversial, attributes of the Global Fund is that unlike other development institutions that rely on country offices to manage or oversee their projects, the Fund does not maintain international staff presence in the countries to which it disburses funds (Feachem and Sabot, 2006). In this connection, the Global Fund hands over management responsibilities for the financed programmes entirely to the recipient country entrusting the key management role in the recipient country to the in-country body called Country Coordinating Mechanism, or CCM.

### 3.1.2 Country Coordinating Mechanisms (CCMs)

Country Coordinating Mechanisms (CCMs) replicate the public-private governance model of The Global Fund at the country level and are supposed to be bringing together governments, civil society and private sector organizations, and people living with the three diseases, to

---

\(^1\) Detailed statistics available on The Global Fund official website: [www.theglobalfund.org](http://www.theglobalfund.org)
work on joint formulation of program proposals that are submitted to the Global Fund for funding and the grant implementation oversight after the funding is obtained. (TERG, 2005)

The Global Fund believes that a strong CCM is critical to the success of Global Fund-supported projects. The CCM Clarifications document states that

“the CCM has been established as a central pillar of the Global Fund’s architecture to insure country-driven, coordinated, and multi-sector processes for leveraging and effecting additional resources to reduce morbidity and mortality from HIV/AIDS, TB, and Malaria”.

As a key element in the Global Fund’s architecture, Country Coordinating Mechanisms are central to the Global Fund's stated commitment to local ownership and participatory decision-making. These country-level partnerships have a task to develop and submit grant proposals to the Global Fund based on priority needs at the national level. After grant approval, they are to oversee the implementation process. As well, for each grant CCM nominates a public or private organization to serve as a Principal Recipient of the Grant. CCMs include representatives from both the public and private sectors, including governments, multilateral or bilateral agencies, non-governmental organizations, academic institutions, private businesses and people living with the diseases. These actors, each with unique skills, background and experience, are supposed to be at the center of the development of proposals and decisions on the allocation and utilization of Global Fund financial resources (TERG, 2005).

3.1.3 Role of CCMs
According to the Guidance Paper on CCM Oversight (2008b), “CCMs have the unique responsibility to orchestrate the overall country management of Global Fund grants”. The CCM Guidelines of the Global Fund to fight AIDS, TB and Malaria state that

“the Global Fund recognizes that only through a country-driven, coordinated and multi-sector approach involving all relevant partners will additional resources have a significant impact on the reduction of infections, illness and death from the three diseases. Thus, a variety of actors, each with unique skills, background and experience, must be involved in the development of proposals and decisions on the allocation and utilization of Global Fund financial resources”
and in order to achieve this

“…the Global Fund expects grant proposals to be coordinated among a broad range of stakeholders through a Country Coordinating Mechanism (CCM), and that the CCM will monitor the implementation of approved proposals.”

The Global Fund suggests that the best way to describe the intended role of CCM oversight is to look at the boards of directors in private sector. Clarifications on CCM Requirements (2007a) say the following about the CCM’s role:

“Like a board, the CCM is ultimately responsible for the actions and welfare of the institution, yet it generally does not get involved with day-to-day operations. The CCM sets the essential policy framework, monitors organizational progress towards meeting targets, and reviews fiduciary issues generally within the confines of regularly scheduled meetings. It intervenes in day-to-day operations only in extraordinary circumstances. In this framework of oversight it is envisaged that the PR is the day-to-day manager and lead implementer of the program. The CCM oversees longer term performance, addresses national strategies for the three diseases, addresses issues related to harmonization with partners, identifies the most efficient utilization of resources, and may ultimately decide to change Principal Recipient”.

Monitoring of the implementation of approved proposal/proposals, or programme oversight according to the Global Fund, is complex and varies from one country and grant to another. According to the studies of a range of CCMs around the world, experiences differ widely across a spectrum of management styles ranging from passive involvement to overly micro-managed (The Global Fund, 2007a). Each country adopts different styles of programmatic oversight depending on many different factors. The overarching goal, however, is to establish a structure that could balance the involvement of all CCM members, effectively allow them to offer their collective expertise and hands-on knowledge, that could support the Principal Recipient(s) and/or sub-recipients in their tasks. Additionally, Country Coordinating Mechanism is supposed to report on a regular basis to Geneva-based head office of the Global Fund, liaise with Local Fund Agent appointed by the Global Fund and partner with the Ministry of Health in order to assure activity synchronization with the national strategy.
3.1.4 Global Fund’s policies and guidelines on CCM

Over the years, the Global Fund has developed a number of documents concerning CCMs – a mix of requirements that CCMs have to meet in order for their proposals to be considered for funding and recommendations that the Global Fund suggests that CCMs should adopt. These policies are described in the three main documents:

- “Revised Guidelines on the Purpose, Structure and Composition of Country Coordinating Mechanisms and Requirements for Grant Eligibility” (2005b)
- “Clarifications on CCM Requirements – Round 7” (2007a)
- “Guidance Paper on CCM Oversight” (2008b)

Because of the country-driven philosophy of the Global Fund, the Fund was initially reluctant to dictate how CCMs should be run. However, the Fund states that multi-sectoral partnerships at country level (and at all levels) are critical to the success of programmes to fight the three diseases (The Global Fund, 2005b). Due to the fact that in the first few rounds of funding, many CCMs did not embody this partnership, the Fund started to impose certain requirements on CCMs. It began by requiring that there should be representation on the CCM from people living with or affected by the diseases. Later, additional requirements were
added concerning the selection process for members of the CCM from the non-government sectors, the preparation of proposals, the nomination of the PR, grant oversight and policies to mitigate possible conflict of interest. Today, the Global Fund refers to these requirements as “The Six Minimum Requirements for Grant Eligibility for Country Coordinating Mechanisms” (2007a). The six minimum requirements are as follows:

1. CCM members representing the non-government sectors must be selected or elected by their own sector(s) based on a documented, transparent process, developed within each sector.

2. CCMs must show evidence of membership of people living with and/or affected by the diseases.

3. CCMs are required to put in place and maintain a transparent, documented process to solicit and review submissions for possible integration into the country coordinated proposal.

4. CCMs are required to put in place and maintain a transparent, documented process to ensure the input of a broad range of stakeholders, including CCM members and non-members, in the proposal development and grant oversight process.

5. CCMs are required to put in place and maintain a transparent, documented process to nominate the PR and oversee project implementation.

6. When the PRs and chair or vice-chairs of the CCM are the same entity, the CCM must have a written plan in place to mitigate against this inherent conflict of interest.

As clearly visible, the Global Fund is still very imprecise and quite abstract in its requirements to CCMs. Potentially, this can create serious malfunction of the CCMs, as the requirements are subject to the individual interpretation by the national governments in charge of CCM set up. However, the Global Fund is very strict on the CCM meeting these requirements. According to the Global Fund, meeting these requirements will help to “level out the playing field” (The Global Fund, 2007a) and ensure fair and wide participation of all stakeholders including civil society and other non-governmental parties.

In fact, if a CCM submitting national proposal to the Global Fund does not meet all six minimum requirements, there is a good chance that the proposal will be screened out even before it is reviewed.
3.1.5 The Global Fund and the good governance concept

It is important to note that the Global Fund’s official policy documents do not state explicitly that the Fund is trying to promote or ensure good governance in management of its funds per se. However, comparison of the CCM requirements set out in the CCM Guidelines developed by the Global Fund that will be discussed in detail further in the text with the components of good governance concept outlined above indicate one reflecting the other. The guidelines clearly reflect the emphasis on accountability, effectiveness, efficiency, equitability, inclusiveness, participation, predictability, and transparency; therefore it is assumed that CCM presumes to represent good governance.

3.2 Zambia and HIV/AIDS, Tuberculosis and Malaria

Zambia, one of the poorest and least developed nations, located in Southern Africa, has one of the world’s most devastating HIV and AIDS epidemics and is among the southern African countries worst affected by tuberculosis and malaria (WHO, 2007). According to UNAIDS and World Health Organization, in 2006 national HIV prevalence was 17 percent resulting in one of every six adults in Zambia living with HIV. In most densely populated Province of Lusaka HIV prevalence has reached 22 percent (Government of Zambia, 2006). Average life expectancy has fallen below 40 years, largely because of high mortality due to HIV, tuberculosis and malaria (WHO, 2007).

United Nations Human Development Report (2006) states that HIV has spread throughout Zambia and to all parts of society and the impact of AIDS has gone far beyond the household and community level. According to the National HIV and AIDS Strategic Framework (2006-2010), HIV/AIDS epidemic in Zambia has devastating personal, social and economic impacts. All areas of the public sector and the economy have been weakened, and national development has been stifled. As Zambia Poverty Reduction Strategy Paper acknowledges, "the epidemic is as much likely to affect economic growth as it is affected by it" (Government of Zambia/IMF, 2002). Due to the scale and severity of the pandemic in Zambia, interlinked with other challenges of poverty, household food insecurity, gender inequalities and weakened public sector institutional capacity, the Government of Zambia has placed HIV and AIDS at the top of its agenda by declaring it a national disaster. Besides severe HIV epidemic, Zambia is also confronted with a serious and growing tuberculosis problem. WHO figures estimate TB prevalence in the country around 7 percent (2006), twice the African regional average (USAID, 2007), placing Zambia’s figures very close to the 22 “high burden”
countries worst affected by the disease (WHO, 2007). Factors such as high population growth, overcrowding, poor housing, poverty, the spread of HIV and non-compliance with treatment have contributed to the increase in TB cases. Malaria also affects the country heavily placing Zambia among the countries with highest malaria prevalence in the world (PEPFAR, 2007). Malaria prevalence in Zambia has tripled over the past three decades. In a population of 11.5 million, there are up to 4 million clinical cases of malaria, accounting for 40 percent of outpatient visits and admissions to health care facilities, and as many as 50,000 deaths per year (PEPFAR, 2007).

For the first time becoming a recipient of the Global Fund’s grant in 2002, until present Zambia has received tremendous amount of US$193,637,153 out of US$539,022,508 pledged by the Global Fund to date to support comprehensive programmes to fight HIV/AIDS, tuberculosis and malaria. This ranks Zambia as the third largest recipient of the Global Fund after Ethiopia (US$419,475,650 disbursed out of $778,012,933 pledged) and Tanzania ($217,966,934 disbursed out of $565,077,255 pledged) (AIDSPAN statistics, as of 14 March 2008) and the world’s largest Global Fund’s recipient per capita. According to the representative of the National AIDS Council, funding provided by the Global Fund is of significant importance for the national health sector, as it constitutes almost a third of the national HIV/AIDS budget, and two thirds of the budget for TB and Malaria.

Richard Feachem, the Fund’s first executive director who officially occupied the post till April 2007, described Zambia as a “star performer” in the administration of the Global Fund resources for tackling AIDS, TB and Malaria in the official note dedicated to 5 years of the Global Fund’s existence (Feachem and Sabot, 2006). As well, Dr. Feachem referred to Zambia as an example of successful grant’s implementation system, where “the Global Fund’s model has already let to a substantial shift in the dynamic between civil society and government” [basically implying effective functioning of the Country Coordinating Mechanism, being the in-country decision-making forum for all the stakeholders] (Feachem and Sabot, 2006).
4. RESEARCH METHODOLOGY

As explained earlier, the present study attempts to analyze the Country Coordinating Mechanism of the “star performer” and the Global Fund’s largest per capita recipient to date using good governance concept based on the concept operationalized by the World Bank. The chapter below describes methodological choices and instruments used in the study.

The research has a qualitative nature and is aimed at enhancing existing data on a particular topic (Ragin, 1994: 92). The choice made in favor of qualitative methods over the quantitative is justified by the ability of qualitative research to provide in-depth knowledge [on issues regarding the Zambia’s CCM], serve as the ground for further “refinement elaboration of images and concepts” [general concept of the CCM and its intended vs. factual performance and concept of good governance and its implementation in practice] (Ragin, 1994: 83). The research is using the theoretical sampling approach, as the research focuses on related phenomena in different country settings and compares the case of Zambia with the cases of other countries that have been studied (Ragin, 1994: 98). The case study is carried out by the means of two data collection instruments: (1) analysis of the internal documentation and (2) in-depth qualitative interviews.

4.1 Case study

The case study of the Zambia’s Country Coordinating Mechanism is central to the research. Single case of Zambia’s CCM is used to test hypothetical assumptions formed through the analysis of existing cases of the CCMs in other countries (Gomm et al, 2000: 24). In this part of the study analytic induction approach (Ragin, 1994: 93) was used, aimed at identifying similarities present across the spectrum of previously conducted studies through analysis from the good governance concept perspective. The choice for this methods is determined by the comparative strength of case study method as it “provides vicarious experience and thorough knowledge of the particular” and “helps towards further understanding” (Stake in Gomm et al, 2000: 7, 19), which highly relates to the goal of the research.

Quantification of data is not a priority, and qualitative data collected is much more valuable for the research and therefore treated as superior (Gomm et al, 2000: 4).
Main idea of the research is to understand the case of Zambia’s CCM in itself, though as well the research attempts to make limited theoretical inference and empirical generalization with support of the other countries’ experiences derived through analysis of the relevant literature. Besides, the audiences for whom the study findings are primarily intended [the Global Fund, Zambia’s CCM, and other donor organizations] will be able to make naturalistic generalizations based on their personal professional experiences (Gomm et al, 2000: 22).

4.2 Main data collection instruments

4.2.1 Analysis of internal documentation
Analysis of the internal documentation related to the Zambia’s CCM work is one of the two instruments used for data collection during the field research. The purpose of this component was primarily to understand the normative framework of the CCM’s functioning by looking at the charters, memorandums of understanding, terms of references, composition and membership, etc] and uncover documented processes and activity of the CCM, as well as any contentious issues that had been captured in the minutes. Additionally, analysis of the internal documentation provided basis for further clarification and expansion during the interviews.

4.2.2 Qualitative interviewing
In-depth semi-structured qualitative interviews with key informants were the most important of the two data collection instruments and central to the case study. Choice of qualitative interviews was determined by the fact that it was the only possible way of gaining hidden information concealed from the outsiders and undetectable through reviewing the internal documentation. The researcher intended to find out and reveal the feelings of the immediate stakeholders about the subject by making the interviewees analyze their experiences. In some way the idea was to “give voice” to the respondents in addition to using them as the source of information (Gomm et al, 2000: 3). As Scheyvens and Leslie write (2000: 127), research “can be therapeutic if the interviewers encourage the participants to reflect on their experiences and to understand how the system that has disadvantaged them can be challenged”. In other words my intention was to make the respondents analytically reflect on what is not satisfactory, why it is so and how it could be fixed. In fact several respondents afterwards noted that our conversation made them think about how the situation could be improved and functionality of the CCM increased.
The form that interviews took was that of “conversation with a purpose” (Burgess quoted in May, 2002: 225). The style of the interviews was conversational, informal and flexible, achieved through active engagement of the interviewer and the interviewee in free discussion on relevant issues, topics and personal experiences (May, 2002: 225). This style was preferred to the more structured and uniform survey interviewing because it was meant to reveal true feelings and thoughts of the interviewees, be utmost frank and speak openly, which can only be achieved in a free informal conversation that qualitative interviewing offers. As May writes (2002: 227), when an interviewer and an interviewee are co-participants in the process of knowledge construction, which interview essentially is, it is based on a more sophisticated, and more satisfactory, ontology and epistemology.

The researcher tried to minimize his role in structuring and sequencing the dialogue, allowing the interviewee to narrate freely elaborating on his/her ‘story’ (May, 2002: 231). Prompts were used in order to get the necessary information and set the interviewee on desired track at times when he/she was deviating from the subject (Dewalt & Dewalt, 2002: 122).

Behavioral aspects of the interviewees, such as demeanor and visual expressions of thought, feelings, emotions, sentiments, and other, about importance of which May talks about (2002: 237), were paid close attention to, jotted down in the form of scratch notes (Dewalt & Dewalt, 2002: 144), and were carefully interpreted and recorded right after the interview while the memories were still fresh (Dewalt & Dewalt, 2002: 149) to make maximum use of the head notes (Dewalt & Dewalt, 2002: 154-156). Initially there was some doubt whether taking notes directly in front of the interviewees might negatively affect the interview, as Dewalt & Dewalt write (2002: 147) “a number of the ethnographers found that taking field notes in front of participants was uncomfortable and objectifying”. However, the type of respondents discussed further in the part on specifics of working with the informants determined the use of notes. In addition, in the beginning of each interview the researcher explained that the information that he was to receive from the interviewee was of exceptional importance, therefore the notes were essential. Besides, most of the interviewees demanded themselves that the interviewer was better to be taking accurate notes of everything they say.

The interviews were recorded on tape in order to allow the interviewer to engage more actively in the discussion as well as be able to carefully listen and analyze the responses of the interviewees, as “taping conversations provides a highly detailed set of observations” (Dewalt
& Dewalt, 2002: 148). Whether or not to tape the interviews was subject of hesitation of the researcher; however, final decision for tape recording was once again justified by the type of respondents (‘privileged group’ discussed by Scheyvens and Storey, 2003) and supported by Dewalt & Dewalt’s words that researchers usually try to tape formal semi-structured and structured interviews and the benefits of the taping (Dewalt & Dewalt, 2002: 148). After the interviews the recordings were transcribed to provide a back-up copy of the recording and due to ethical considerations discussed further in the text.

a) Internal informants
The rationale behind selection of the informants was based on identification of the informants who would be able to provide the information necessary for the research. Key informants were identified to be the CCM members, as they are directly involved in the CCM and its work, and therefore should be considerably aware of the issues that the study is looking at. Out of 23 CCM members whom was intended to interview the researcher managed to interview 17, with 1 being deliberately left out due to being new to the CCM and having attended only one meeting and therefore, as assumed, unable to provide me legitimate information based on more or less extensive personal experience.

b) External informants
Further on in the process decision was taken to supplement interviews with CCM members as respondents with those of informants external to the CCM. This was done with the intention to balance the views internal to the subject of research and external to it and diversify the sources of information to increase validity of the research (Scheyvens, Leslie, 2000). External informants were non-CCM members from a number of different organizations that included governmental institutions, civil society and international donor organizations.

External informants were located using the snowball sampling technique where existing study subjects recruit future subjects from among their acquaintances (Patton, 1990). This method was chosen primarily because of the difficulty to identify and access information-rich external informants (Patton, 1990). Also, Scheyvens and Storey (2003: 185) when discussing ways of accessing privileged informants suggest the technique that they call the use of networks, which greatly resembles snowballing. There is potential risk with this technique, as it may results in homogenous type of informants and biased nature of responses (Patton, 1990). In order to minimize this risk external informants representing different type of organizations
and constituencies were selected out of total number of external informants identified. A total number of 7 external informants have been interviewed.

4.2.3 Questioning techniques
Interviews followed interview guides prepared in advance (see Appendix 1: Standard interview guide) and consisted of open-ended questions. The question types used were straightforward yes/no questions and open-ended ones, answer to which would leave ground for further analysis and interpretation. Some questions were aimed at unearthing understanding of the interviewees of a specific subject [for example, purpose and main functions of the CCM, legal relations to the Local Fund Agent and the Global Fund]; others were aimed at identifying the current status of things within the CCM. Most of the questions were contextualized, i.e. talking within the context of the Country Coordinating Mechanism and its work (May, 2002: 226), and specific rather than abstract and generalized. The choice of the specific contextualized and specific questions was justified primarily by the type of respondents that were used in the research. All of the respondents were highly educated professionals, therefore asking specific questions was sufficient enough to get the necessary information.

4.3 Specifics of working with the informants
As my study group can be characterized as privileged or elite, there are specific methodological challenges that arise from working with this group. McDowell, Cormode and Hughes (quoted in Scheyvens and Storey, 2003: 184) write that researching “the powerful” differ considerably from “non-elite research”. Foremost challenge that arises is the issue of the researcher’s self-positioning in relation to the research subjects (Scheyvens and Storey, 2003: 185). In case of the present research the researcher decided to use the combination of advantages of being an ‘outsider’ and possibility of the research subjects considering you ‘a foreign expert’ and therefore be more willing to cooperate (argued for by Herrod 1999, cited in Scheyvens and Storey, 2003: 186) with advantages of the strategy of ‘shared positional spaces’ argued for by Mullings (1999, cited in Scheyvens and Storey, 2003: 186) in case of which the researcher presents himself to the elites as a ‘temporary insider’, or someone who shares understanding of the subject of study from inside can be treated as “an intellectual equal”. The combination of factors such as being a foreign academic from Sweden cooperating with the Global Fund on one hand and having practical experience of work with both the Global Fund and the CCM was used by the researcher to represent himself to the informants and gain access to the information.
4.4 Ethical considerations
The research is focusing on a sensitive and controversial subject that involves substantial amount of money and power relations, therefore its findings can potentially have negative consequences for some of the stakeholders. Prior to the interviews the interviewees were informed that the interviews were anonymous and the information received during individual interview would be kept confidential, and that the final product of the research would not mention the names and the positions of the interviewees next to the findings. In addition it was stated that the interviewee could refuse from the interview even though he/she had given his/her previous consent (Kvale, 1996). For the privacy reasons the text of the present study does not mention the names of the people interviewed and does not include the list of the minutes used for the analysis as a reference.

Interviewees were asked for permission to record the interviews and the recordings of the interviews were transcribed onto the paper and erased right after the interviews. Interviewees were notified that the tape recording would be transcribed onto paper and erased directly after the interview.

Before each interview the researcher introduced himself and the study explaining that the purpose of the study is purely academic, though the summary of its findings might present valuable information for the Global Fund to gain better understanding of the issues existing in the CCMs and make adjustments and additions the general concept of the CCM to improve management of the granted funds. It was specifically emphasized that the research has not been commissioned by the Global Fund or any other donor organization and that the researcher himself is not affiliated with any of the organizations.

4.5 Reliability and validity of the selected methods
Many of the considerations on reliability and validity of the selected research methods have been discussed in the text. This part focuses on those of main concern that have not been covered above.

Even though before each interview it was clearly explained that the research was not commissioned by the Global Fund, there is still possibility that the interviewees viewed me as associated with the Global Fund or any other donor organization, therefore were giving me responses that they would want the Global Fund to receive. There is a chance that the
respondents had hidden agenda when responding to my questions, perhaps thinking that the report might further result in the Global Fund making certain decisions and taking actions based on the study, therefore trying to indirectly influence the Global Fund’s decisions.

The data that the researcher was able to retrieve from the internal documentation is rather limited and did not answer most of the research questions. For this reason the information received from the qualitative interviews and supported by the information retrieved from the studies conducted in other countries’ CCM will be mostly relied on. Heavy reliance of the research on the interviews, according to May (2002: 237) raises certain validity issues, as it is subject to “memory, selectivity, and deception in interviewees’ accounts, as well as issues around fluency and divergent linguistic codes”.

It has been noted that participant observations are recommended as highly desirable in this type of a research as a check on responses to interviews when exploring behaviour (Dewalt & Dewalt, 2002: 96) and allow to experience that the researched group may be unaware of or are unwilling or unable to discuss in an interview (Bryman, 2004). However, actually witnessing the CCM at work presented impossible as no meetings were held during the course of the fieldwork.
5. ANALYSIS: GOOD GOVERNANCE AND COUNTRY COORDINATING MECHANISMS

5.1 Previous studies on CCMs

There has been previous research conducted on the Country Coordinating Mechanisms. The body of research largely consists of studies commissioned by the Global Fund conducted by contracted international consultants or by independent institutions, but in cooperation with the Global Fund. Objectivity of the studies can be questioned, as the researchers were connected with the Global Fund in one way or another. Another part of the research body consists of articles and documents on CCM related issues published by the Global Fund.

Twenty case studies conducted between November 2003 and April 2004 focus on selected CCMs around the world: Africa: Benin (Gauvrit, 2004), Burkina Faso (Peschi, 2004), Cameroon (Moulin, 2004), Ghana (Jansegers, 2003), Kenya (Lemma 2003), Morocco (Schmitt, 2003), Regional CCM for South Africa, Mozambique and Swaziland (Zucchello & Giuliani, 2004), Rwanda (Jansegers, 2003), Senegal (Kerouedan, 2004), Swaziland (Venetsanou & Madeo, 2003); Asia: Cambodia (Wilkinson, 2004), Indonesia (Reynolds, 2004), India (Grose, 2003), Pakistan (Grose, 2004), Vietnam (Charreau, 2004); Eastern Europe: Armenia (Samoilenko, 2004), Ukraine (Brusati, 2003); Latin America: Peru (Collins, 2003), Honduras (Collins, 2003). The studies were following similar format with the purpose to collect information on CCM operations, identify how the countries were operationalizing the principles of the Fund; identify needs for CCM functioning, proposal development and oversight of implementation, monitoring and evaluation of Global Fund grants, and make recommendations for strengthening representation, participation and governance of CCMs.²

Analysis of CCM composition for the Rounds 1 and 2 (The Global Fund, 2002, 2005a), and Rounds 3 (The Global Fund, 2003, 2005a) and 4 (The Global Fund, 2004b, 2005a), the two sets of studies, aimed to gather information on representation in CCMs by the different sectors in the different regions, on the chairmanship and vice chairmanship of the CCMs, as well as to have preliminary information on the proposed Principal Recipients. Multilateral and Bilateral Participation in CCMs in Round 4 (The Global Fund, 2004c) was a quantitative study summarizing donor organizations membership in CCMs worldwide.

² CCM Country studies are publicly available at the official website of the Global Fund to fight AIDS, Tuberculosis and Malaria http://www.theglobalfund.org/en/apply/mechanisms/
There has been a set of studies conducted that focused on involvement of particular stakeholder groups in CCMs. In 2005, Technical Evaluation Reference Group prepared the report on the Performance assessment of Country Coordinating Mechanisms based on the checklist of necessary components. *Report of a Multi-Country Study of involve ment of People Living With AIDS in CCMs* (Doupe & Flavell, 2004) conducted by GNP+ in 13 countries during 2003 aimed to assess the degree of participation of people living with HIV and AIDS in CCMs and gave recommendation to strengthen their participation within CCMs. In cooperation with International Labor Organization, in 2006 the Global Fund conducted the multi-country review of private sector involvement in CCMs.

A discussion paper *Country Coordinating Mechanisms: Building Good Governance* (The Global Fund, 2004a) has an objective to contribute the development of future guidance for country coordinating mechanisms on governance issues through sharing governance experiences made by CCMs. The main text describes five countries’ experiences of developing governance mechanisms for Global-Fund related activities.

The most recent study was published in December 2007 (Stinson et al.). The study assessed CCMs in Nicaragua, Nigeria, Tanzania and Zanzibar and draws conclusions about the CCMs capacity to perform oversight of the grants. The body of research is concluded by feedback reports from regional and national workshops (2004d).

It is important to note that none of the previously conducted studies on CCM took good governance concept as analytical framework, focusing on a wider spectrum of issues related to the CCM functioning. However, if to analyze their findings along the good governance components, it becomes visible that CCMs across the world do experience problems complying with the standards set by the concept. Identified common problems with CCMs were the following:

**Inclusiveness and Predictability**

Most of the CCMs were set up quickly to meet proposal submission deadlines set by the Global Fund with members being mainly nominated by ministries of health. In most cases over time CCM membership has extended to include representatives from the major stakeholder groups recommended by the Fund. However, civil society is often underrepresented and there is still only minimal representation of people living with the three
diseases (in some cases affected groups are unrepresented whatsoever). As well, membership tends to be dominated by the government. Few CCMs are ensuring gender balance following the Fund guidelines. Countries which due to their size have decentralized administrative and political structures have not set up sub-national CCMs, which automatically excluded most interested parties, both governmental and non-governmental, from the Fund processes.

**Equitability and Participation in CCMs**

While the CCMs have formally increased the opportunity for civil society participation, the representatives are not equal in decision-making. In most cases CCM is dominated by government members and in very few cases by international agencies representatives. Institutional cultures and the need to maintain working relations limit debate and opposition from CCM members to government control of decision making in some CCMs. Often, there is no genuine involvement by CCM members in the CCM decision-making process. In addition, involvement of stakeholders from outside of the national capitals is limited.

**Predictability/Legal environment**

The systems are not yet established well enough to enable participative approach to decision-making and implementation oversight as well as meaningful participation of the CCM members. By now, only small number of CCMs has developed terms of reference for the members and rules of procedure and some others are in the process of developing them. CCM roles, responsibilities and operating methods, as well as individual designated functions are not clearly defined, and are not clearly understood by CCM members or outsiders. Besides, limited efforts by CCM to understand and follow the Global Fund grants and their implementation were reported. Most CCM chairs are from the Ministry of Health) and in some countries the Vice Chairs were also from the Ministry despite guidance that they should be from different constituencies. Few CCMs have developed clear selection criteria for Principal Recipients resulting in some cases in lack of transparency in PR selection. In some cases CCM members were not involved in choosing the CCM chair or in selecting the Principal Recipient.

Only two studies indicated Principal Recipients reporting to CCMs as they are obliged to do. Information provided to CCM is often reported of poor data quality, excessively voluminous and non-quantified; in addition, Principal Recipients and CCM administration had problems meeting reporting deadlines. In this connection, in many cases CCM members do not know
whether projects funded through Global Fund grants are being effectively implemented. As mentioned earlier, neither the Fund guidelines nor the grant agreements contain any requirements or recommendations on CCM action with regard to PR reports. This is important because the PRs have a direct legal relationship with the Fund, but not with the CCM. Consequently, the CCM appears to have no formal authority with regard to overseeing the PRs. However, in some cases despite of CCM members awareness of serious problems in grant implementation, CCMs were reluctant to take action to solve them.

**Effectiveness and Efficiency**

In most cases, CCM members did not have the capacity and required expertise to participate effectively on the CCM. As well, there is often lack of practical resources and finances to make effective operation possible. Ineffective communications hinder effective participation, with a small number of exceptions. Members from small, informal organizations had lower capacity to participate in the meetings and were more likely to face language difficulties. CCM secretariats vary in style and strength, but are almost universally experiencing lack of financial and labor resources, which contributes to poor communications and rushed proposal preparation. More CCMs are now creating subcommittees, technical panels to delegate tasks to improve efficiency. Conflicts of interest exist in many forms, including where Chairs and Principal Recipients coincide. In most cases the actions to limit conflict of interest have not been taken.

**Accountability**

Limited or no accountability of the CCM members to the groups they were representing was a problem in all but two CCMs covered in the studies. This was a result of insufficient selection procedures for members, problems of ineffective communication, lack of resources for networking.

**Transparency**

Previously conducted studies did not address the issue of transparency of CCM decision-making.

Unlike the studies conducted on CCM in the past, the present study takes good governance concept as the main analytical framework of the CCM of Zambia. It assesses whether the
Country Coordinating Mechanism of the Global Fund leading performer actually represents good governance.

5.2 Good Governance and the Country Coordinating Mechanism of Zambia
The Country Coordination Mechanism of Zambia for the Global Fund to Fight AIDS, Tuberculosis and Malaria (CCM/Z) has been established according to the requirements of the Global Fund to fight AIDS, Tuberculosis and Malaria as a working group supporting the activity of the National HIV/AIDS/TB/STI Council. According to its main operational guidelines, the Manual of Procedure, CCM/Z exists to review, approve, and coordinate applications to the Global Fund, to monitor and guide the implementation of projects approved by the Global Fund for Zambia, and to establish the working mechanisms of the CCM/Z. The Manual of Procedure states that the CCM/Z adheres to the principles of “openness and transparency, broad participation, and efficient operation and seeks to contribute to the successful implementation of Global Fund projects in Zambia” (page 4).

Good Governance Component 1: Predictability
Technically, the CCM/Z has in place all the necessary normative documents that officially safeguard the component of predictability, or legal environment being conducive to developmental purpose. Main document of reference is the CCM/Z Manual of Procedures that describes general principles of the CCM/Z, its composition and membership, representation, duties and responsibilities of the CCM/Z members, conflict of interest policy, changes in membership, organizational structure and working methods, meetings, and responsibilities of the CCM/Z entities: the Secretariat, Principal Recipients, and Working Groups. Despite the scope, the description is rather general and can be subject to various interpretations.

Perhaps, responding to the Manual’s general nature, the Secretariat that consists of the Chair and Vice-Chair has the right to interpret the CCM/Z Manual of Procedure, as emphasized in the Supplement section 5.1. However, as mentioned by many of the interviewees, the Secretariat tends to interpret the manual in a way, which is favorable to the government, represented by the Ministries. The fact that the Chair is from the state-owned academic institution and the Vice-Chair is from the governmental ministry affects the conveners’ intended impartiality. The conveners presently are represented by the Academic and Governmental Sector: the Chairman from the University of Zambia and Vice-Chair from the Ministry of Education.
The current Chairman has been holding the post since July 2007. Decision to elect new Chair was deliberately taken to increase neutrality of the post. Interesting thing to note is that current Chairman, who automatically replaced previous Chairman who was forced to resign due to the announced conflict of interest, used to be the Vice-Chair. This is a standard procedure, specified in the Manual of Procedures 2.30, which says “… if it is deemed by a majority of disinterested CCM/Z members that the Chairperson is thus conflicted, s/he must be replaced by the Vice-Chair for the duration of the conflict.” This practice itself leads to the conflict of interest, as the Vice-Chair, who worked in the same team and performed the same tasks as the Chair, replaces the Chair upon the resignation of the latter. Formally, as many of the CCM members pointed it, this change has eliminated the conflict of interest; informally, however, there was no visible change.

Each CCM member is required to sign the statement of pledging to adhere to the outlined rules. As specified by the officer from the National HIV/AIDS/TB/STI Council, the Manual of Procedures was largely based on the suggestions of the Global Fund’s consultants that were in charge of developing the Manual and CCM manuals courtesy of other recipient countries; therefore it is unlikely that there would be any major flaw with the content. However, although sharing of expertise and best practices is highly welcomed in development sphere, this fact questions ownership of the main normative document by the CCM/Z members.

As well, when discussing certain functions clearly outlined in the Manual of Procedures with the interviewed CCM members, it was discovered that very few of them had clear understanding of the CCM’s roles, responsibilities and operating methods. Many of the members are unaware that CCM has to monitor the implementation process of the Global Fund’s grant: one of the two most important functions assigned to the CCM.

In fact, the CCM/Z is legally left out from the oversight function that it is supposed to perform due to the formal arrangements with the Global Fund. The contract between the Global Fund and the Local Fund Agent (LFA) does not mention the CCM; in a similar fashion, the funding agreement between the Global Fund and the Principal Recipient does not talk about the CCM’s role. As a result, the Global Fund considers the periodic reports of the LFA on the grant implementation, afterwards sending an official note to the CCM stating what was concluded by the LFA. However, the official note does not explain the details of
how certain conclusion was made; therefore the CCM/Z is left unaware of the very issues it is supposed to be in charge of. In a similar way, the Principal Recipients, according to the funding agreement, are accountable to the Global Fund, not to the CCM/Z; therefore, the CCM does not receive official progress reports on timely and regular manner sent to the Global Fund. Funding contract between the Principal Recipient and Sub-recipients does not mention the CCM/Z as well; therefore, sub-recipients are legally accountable to the Principal Recipients only. As a result, there is no formal incentive for the CCM to develop its capacity to perform oversight function, which contradicts to the Global Fund’s claimed adherence to local ownership.

Other two normative internal documents of the CCM are Terms of Reference for the Finance and Audit Committee and the Monitoring and Evaluation Committee. These committees function to provide technical support to the CCM. Both of them briefly touch upon the roles and responsibilities of the CCM and in general terms describe the functions of the Committees. The two committees have been just recently established and have not yet started functioning; therefore, there is no evidence of their work.

There is very limited autonomy of the CCM. The CCM/Z does not exist formally, or legally, as there is no legally documented basis for its existence. It has been set up informally as a working group; however, there is no legal act to back up its existence. Thus CCM/Z is not a legal authority. When it comes to enforcing its actions or responding to the financial malfunctions in the implementation process, the CCM/Z would refer to the National HIV/AIDS/TB/STI Council or the Ministry of Health to act on its behalf.

There is no introduction to the CCM work and individual duties and responsibilities to the newly elected CCM/Z members. The phrase said by one of the interviewed CCM members reflects the views of “You are virtually being thrown into something with so much turmoil. It took me long time to get into the course of the things, obtain necessary basis documentation, and familiarize myself with the foreign concepts. No any kind of orientation is given whatsoever, so you are left out of the discussion.”
Good Governance Component 2: Inclusiveness

The CCM/Z membership currently comprises 22 members, the Chair and the Vice-Chair and the Secretariat, represented by the officers of the National HIV/AIDS/TB/STI Council.

Complete CCM/Z Membership, as of November 2007:

CCM/Z conveners (2)

1) The CCM/Z Chair – Professor, University of Zambia
2) The CCM/Z Vice-Chair – Permanent Secretary, Ministry of Education

Government sector (7)

3) Permanent Secretary, Ministry of Education
4) Permanent Secretary, Ministry of Finance and National Planning
5) Permanent Secretary, Ministry of Youth, Sport and Child Development
6) Permanent Secretary, Ministry of Community Development and Social Welfare
7) Permanent Secretary, Ministry of Information and Broadcast Services
8) Permanent Secretary, Cabinet Office- Gender in Development
9) Director General, National HIV/AIDS/TB/STI Council

Non-Government sector (6)

10) Representative of the youth, Chairperson, Forum for Youth Organizations
11) Representative of the academic/educational/research institution, Deputy Vice Chancellor, University of Zambia
12) Representative from a religious/faith-based organization, Bishop, Catholic Church
13) Representative from the traditional leadership/traditional healers (President, Traditional Healers and Practitioners on AIDS in Zambia, THPAZ)
14) Representative from NGOs (Executive Director, Zambia Network of AIDS NGOs, ZNAN)
15) Representative from NGOs (Executive Director, Churches Health Association of Zambia, CHAZ)

People living with HIV/AIDS; and/or TB; and/or Malaria (2)

16) Representative from People Living with HIV/AIDS (Chairperson, Zambian Network of People Living with HIV (NZP+))
17) Representative of the People Living with TB (Director, Community Based TB Organizations)

Private Sector (1)

18) Representative from the Zambia Business Coalition on AIDS (Private Sector Representative, ZBCA)

Cooperating partners sector (4)
19) Representative from multilateral organization (HIV/AIDS Advisor, World Health Organization (WHO))
20) Representative from multilateral organization (Country Coordinator, Joint United Nations Programme on AIDS (UNAIDS))
21) Representative from bilateral organization (HIV/AIDS Advisor, DFID)
22) Representative from bilateral organization (Population and Nutrition Director, USAID)

Figure 3: Membership of the Country Coordinating Mechanism of Zambia per sector

According to the officer in charge of the administration of the CCM/Z work, it was attempted to balance the representation of different sectors within the CCM/Z. Still, however, the governmental sector enjoys slightly greater representation than the other sectors. This fact, as indicated by the interviewees, affects the voting and decision-making in favor of the governmental sector. In addition, although formally not being able to vote, in accordance with the Manual of Procedures, but performing the administrative function of the convener, the Chair tends to moderate discussions during the meetings and decision-making process in such a way as is favorable to the governmental sector.

Formally, all the sectors involved in the HIV/AIDS, TB and Malaria in the country are represented in the CCM/Z membership. CCM/Z has all the required components present: government, private sector, civil society, etc. However, do CCM/Z sector representatives really represent their sectors? Careful analysis of the members reveals certain issues.

There is a poor representation of the people on the ground, the affected people, the very grassroots levels who the Global Fund funding is aimed at supporting.
Geographical representation is minimal, since all the CCM/Z members are based in Lusaka.

As was admitted by the key informants, the CCM members represent: 1) themselves and their own views and interests; 2) their organizations and their programmes and plans. They do not represent their communities at large for a number of reasons that will be discussed further on.

It is the requirement of the Global Fund that CCM members must be selected or elected by their own sector(s) based on a documented, transparent process, developed within each sector. Afterwards, it is assumed that the representative has a mandate to make decision on behalf of the community he/she is representing, so his/her legitimacy is not questioned. Relevant documentation supporting selection of each CCM member is available; however, there are certain questions that arise regarding the validity of the selection process of some of the CCM members. In particular, this concerns young people and women, two groups that are most vulnerable to HIV infection, that are represented by the Ministry of Youth, Sport, and Child Development and the Cabinet Office. As few of the informants pointed out, youth is basically not represented, as the Permanent Secretary is more concerned with the Ministry’s role as a sub-recipient of the funding rather than issues and problems faced by the youth at large. Similar situation is with women who are currently represented by the Cabinet Office, and Zambian community represented by the Ministry of Community Development and Social Welfare.

Permanent Secretaries represent only their Ministry’s interests as regards proposal development and funding instead of the larger community and have poor knowledge and interest in the CCM and its mission, as noted during the interviews with the Permanent Secretaries and other key informants.

Questions also arise regarding representation of the people living with HIV/AIDS, TB and Malaria. According to the documentation, the Chairperson of Zambian Network of People Living with HIV (NZP+) was elected by the Board of the Network. Thus, the representative of the people living with HIV represents not the vulnerable group people per se, but the organization she is heading. People living with TB are represented by the Director of the Community Based TB Organizations. These officers are working more on the national policy level and in fact are quite distant from the grassroots. Besides, as mentioned by quite a few
key informants and noted during the interview, the affected groups’ representatives are not very familiar with the purpose and key functions of the CCM.

Some interviewed CCM members mentioned that election process of the CCM members was quite hectic, done within a shortage of time. Although supporting documented evidence in form of the minutes was produced as the requirement of the Global Fund, the process was not done upfront.

**Good Governance Components 3 and 4: Equitability and Participation**

As indicated during the interviews and identified through review of the minutes, CCM/Z decision-making process is clearly dominated by the governmental sector, in particular the Ministry of Health. Ministry of Health is dominating due to the areas of the CCM/Z work. Most of the informants agreed that the CCM/Z follows agenda set by the government. Large presence of the influential governmental officials and dependency of many of the CCM members on the government, both direct and indirect, are the reason. Representatives of the non-governmental organizations are often dependent in some way from the government and ministries: it is recognition, protection, or simply state funding.

It is interesting that if to look carefully at the membership of the CCM/Z it becomes apparent that it consists mainly of organizations that are competing for the funding in this way or the other. Although formally only 5 organizations represented in the CCM/Z receive the Global Fund’s money (4 Principal Recipients: Ministry of Health, Ministry of Finance and National Planning, Zambian Network of AIDS NGOs, and Churches Health Association of Zambia and one sub-recipient - Traditional Healers and Practitioners of Zambia), other organizations, with an exception of the private sector and donor organizations, receive the money from the government. Ministry of Education is a beneficiary of the Ministry of Health that finance programmes on education and behavior change communications in the educational system. University of Zambia is funded by the Ministry of Education and partially the Ministry of Finance and National Planning. Representative of the Church is largely connected with the Churches Health Association. The private sector although not financially dependent on the government, is struggling for the recognition and support of the government.

Often, as many interviewees noted, representatives dependent on the government do not want to contradict the decisions and freely speak up and challenge the governmental sector in order
not to “rock the boat”, the expression that quite a few of the informants used, and jeopardize own organization’s position or funding prospects. “Some members look behind their shoulder to see if the Permanent Secretary is smiling, as most of the CCM members’ organizations at some point of time will have to turn to the Ministries to ask for this or that. It is patronizing”. Financial dependency results in the lack of impartiality of the CCM/Z members, therefore making them unable to effectively scrutinize the Principal Recipients’ implementation of the funding and perform one of the crucial functions of the CCM.

The same situation occurs when performance of the Principal Recipients (PRs) is discussed by the CCM/Z. In this case, the Principal Recipients are allowed to be present, although they do not participate in the voting process. However, presence of the PRs does not allow the CCM members who are often sub-recipients of the PR’s money and therefore highly dependent on the PR to express openly their opinion regarding the PR’s performance in the grant implementation. The situation when the CCM consists mostly on the Principal Recipients and sub-recipients create serious conflict of interest as the monitor is the beneficiary of the one monitored.

All four Principal Recipients are members of the CCM. Their direct presence clearly affects the objectivity of decision-making in their favor, as identified through some of the protocols taken at the key meetings.

In decision-making the CCM relies greatly on the National HIV/AIDS/TB/STI Council, as the source of expertise. There is no necessary degree of independent thinking. This fact was admitted by the National HIV/AIDS/TB/STI Council and the CCM members interviewed. For the very same reason key decisions are influenced by the National HIV/AIDS/TB/STI Council, which, in its return, is not independent in taking decisions and largely influenced by the Ministry of Health.

Private sector representative has little interest in the work and functioning of the CCM/Z. CCM attendance sheets indicate poor attendance and multiple substitutions of the private sector representative. Besides, private sector representative seems to have poor understanding of the CCM and its purposes. For example, during the interview the representative of the private sector referred to the CCM as “one of the NGOs”.

Good Governance Component 5: Accountability

Although the CCM members are required to consult the constituencies they represent before and after the decision-making, this does not happen. The consultation is mostly limited to a small circle of advisors within their own organization, if any at all. Otherwise, the members rely solely on themselves. This is in part a result of the poor CCM/Z administration. As all of the CCM members interviewed complained, the CCM-related paperwork usually comes in the morning of the same day there is a CCM meeting, so it does not appear possible to consult the larger community, especially as regards social groups representatives.

As representatives of the affected communities mention, there is no capacity to report to a larger community. “How often am I able throughout the year to report to the districts? What I can do at most is to report at the Board meetings”, said one of the key informants representing larger community.

Poor CCM administration is attributed to the fact that currently there is no full-time employee who would focus on the CCM related activities only. At present, the CCM administration is performed by the National HIV/AIDS/TB/STI Council, more precisely officers appointed to perform CCM administrative work in addition to their direct responsibilities. The situation, however, is expected to be improved in the nearest future, as the Global Fund agreed to recruit a full-time CCM administrator.

There is lack of commitment of the CCM members to the work of the CCM. “Every time I attend the meeting, there is a new set of members”, few of the key informants stated. Reviewing the CCM members’ attendance sheets, it became obvious that virtually every meeting witnesses a different set of members. Partially, as explained by the key informants, this is a result of the CCM membership being unpaid; therefore, substantial load of responsibilities that each CCM member has is expected to be carried out on a voluntary basis. The members have permanent jobs and responsibilities, thus CCM/Z being not a priority. Permanent Secretaries have clearly demonstrated lack of interest in the meetings, either because of reluctance or having priorities, sending in their deputies or assistants as substitutes. Complexity of the Global Fund’s grant implementation in the country, however, requires full awareness and good knowledge of the work and processes in order to be able to contribute to the CCM’s work on behalf of the larger community. In case of constantly changing members the essence is being lost. Due to poor attendance and lack of commitment of the CCM/Z
members, the members are not very clear who exactly is member, which sector is represented in the CCM/Z and which is not.

**Good Governance Component 6: Transparency**

Despite the fact that the CCM/Z has a crucial function in the grant management, larger professional community involved in the area of HIV/AIDS, TB and Malaria prevention and treatment outside of the CCM membership is unaware of its existence. The same concerns the sub-recipients of the Grant. Within the Ministries that were visited during the course of the research, relevant officers could not even single function of the CCM/Z.

Decisions taken by the CCM and issues related to the grant implementation in the country are not disseminated to the larger public. People external to the CCM refer to it as a highly discreet organization. When the call for inclusion into the proposal was announced, CCM/Z did not disseminate the information to the larger community of NGOs and CBOs that might be interested and whose projects might be highly contributive to the national combat against the three diseases. Including other actors in the programme might increase coverage and scope of the provided services. As some of the informants believed, this was done on purpose by the Ministry of Health in order to create a closed club of the Global Fund’s recipients.

Transparency of decisions is an issue within the CCM/Z as well. “Under-table negotiations”, that is how the interviewed CCM/Z members some decision-making process. Large example traced through the minutes is procurement system for the Global Fund financed programmes and projects. CCM/Z members agreed on creating a single countrywide unified procurement system. However, despite of the taken decision, at the end the government decided on contracting the American procurement agency for this purpose, despite creating parallel structures at the system level.

**Good Governance Components 7 and 8: Effectiveness and Efficiency**

Assessment of the effectiveness and efficiency of the CCM members has been largely based on the interviews with external key informants and staff members of the multilateral and bilateral development agencies involved in the HIV/AIDS sphere. It has been estimated as very weak. Interviewed CCM members themselves along with CCM/Z members do not have individual capacity to make sound decisions and lack technical knowledge and largely rely on the Secretariat represented by the National HIV/AIDS/TB/STI Council and the CCM Chair to
make the decision. It is worth noting that the Chair representing the academic sector and the Vice-Chair from the Ministry of Education have no previous experience in managing donor funds. Effective management of the Global Fund’s grant is a complex task, which requires comprehensive understanding of the health system as a whole. Most of the CCM members do not belong to the health system, with the exception of the Ministry of Health, which does not represent the entire health system. Instead, CCM/Z is largely comprised of policy and planning officers and disease officers. However, when managing donor funding it is essential that the implementation decisions are based on the most effective and efficient way of utilizing the resources. CCM/Z members are not engaged in the same discussions that are taking place in the health sector of Zambia and are unlinked from it on the daily basis.

The phrase below said by the external key informant responding to the question about the CCM effectiveness reflects the dominant view of the external informants.

“In Zambia the CCM is a very lovely group of people. We have very nice time getting together during the CCM meeting, talk, have a cup of coffee. But they cannot govern. Don’t get me wrong, they are not useless. They are nice to have a cup of tea and a nice talk. I enjoyed meeting with these very interesting people. But they cannot govern the Global Fund in-country resources.”

Another widespread opinion among the external informants is expressed by the following phrase:

“CCM members have absolutely no idea what is going on [regarding the Global Fund’s grant implementation]. Even to pretend that there is good governance of the Global Fund resources is mindless as there is no governance whatsoever.”

“Generally CCM/Z is just a formality, playing a symbolic role, a part of the Global Fund’s architecture, created as a response to the requirements set by the Global Fund, as most of the CCM intended work is being done elsewhere.”

At present, according to the Director General of the National HIV/AIDS/TB/STI Council, the Council and the CCM/Z greatly overlap in their functions. At present, CCM/Z Secretariat is represented by the National HIV/AIDS/TB/STI Council. This is done with the purpose of the decisions taken by CCM/Z being consistent with the national policy and targets. The Council has better capacity in this sphere. As mentioned earlier, in most cases, the decisions made by
the CCM/Z go to the Council for further analysis and approval. Perhaps in this connection many of the CCM/Z members and cooperating partners see the CCM/Z as “… basically just another bureaucratic layer that is confusing and hindering the process.”

The oversight function is performed by the Local Fund Agent, the representative of a reputable international auditors company, instead of being performed by the CCM. Thus, the CCM is left with the function of the proposal development, which in its turn is also overtaken by the National HIV/AIDS/TB/STI Council and current Principal Recipients (as mentioned by the key informants from the NAC). The role of the LFA is to serve as the Fund's "eyes and ears" within the country, evaluating the financial management and administrative capacity of the nominated PR and monitoring the performance of the PR. This is a pure doubling of the oversight function, which is also a responsibility of the CCM.

Addressing the issue of efficiency, there is an issue of the necessity of the CCM existence in Zambia, as CCM/Z being a separate coordinating mechanism represents contradiction to the Global Fund’s stated aim to support efforts to strengthen underlying health systems in recipient and claimed support to the programmes that build on, complement, and coordinate with existing regional and national coordinating systems (Global Fund Policy, Guidelines and Principles). It is important to mention that there is experience when recipient countries used existing structures to perform the role of the CCM. Kenya uses its Joint Inter-Agency Coordination Committee, a health sector-wide body, as the coordination mechanism (Lemma, 2003). In Morocco the UN Theme Group on HIV/AIDS was expanded to become the CCM and is now responsible for national HIV/AIDS programme (Schmitt, 2003). Similarly to these countries, Zambia could have used a long established national structure that theoretically could perform the role of the CCM in proposal development and oversight of the Global Fund grant implementation – Zambia Health Sector-wide Approach (SWAp).

In fact, today most bilateral and multilateral development cooperation agencies use sector-wide approach to donor funding (Garner P et al, 2000) According to the literature, the essence of SWAp is to increase coordination, control and sustainability in development cooperation (Seco and Martinez, 2001.). Although, according to the recent studies, definitions of the SWAp model are general and vague in character, and successful implementation depends largely on the country’s individual adaptation of the approach within the country context (Sundewall and Sahlin-Andersson, 2006), Zambia Health Sector-wide Approach has been
functioning since 1992 when the country began to utilize most of the principles of Sector-Wide Approaches in its health sector even before SWAps appeared as an approach to managing development cooperation (Neupane and Njie, 2007).

According to the in-depth assessment conducted by Neupane and Njie in 2007, Zambia SWAp is a partnership-based system that operates at the center through a set of closely linked consultative structures comprising the Annual Consultative Meeting at the top, down to the various Technical Working Groups and ad hoc task forces. SWAp processes at different levels engages a broad range of stakeholders, from senior management of the Ministry of Health that includes Permanent Secretary, Directors, Heads of Units, Chief Policy Analysts, Senior Planners, Provincial officers, Health Statutory Boards and bodies, other line ministries, provincial and district level staff, the Heads of Missions/Agency of the Health Cooperating Partners, non-governmental, community-based faith-based organizations and private sector partners. The main technical sub-committees or working groups are for Monitoring and Evaluation, Financing, Procurement, and Income and Expenditure. (Neupane and Njie, 2007).

**Figure 2: Zambia Health SWAp Coordination Structure (Source: Neupane and Njie, 2007)**
Within Zambia’s SWAp, the National HIV/AIDS/TB/STI Council is a broad based corporate entity that is charged with the responsibility of directing and coordinating the national response to the epidemics. It is made up of representatives of GRZ Ministries, civil society - including people affected by the diseases, academia, the private business sector and cooperating partners. These NAC central structures are extended to the provinces and districts through the Provincial and District Task Forces. High level political/policy guidance is provided by a Cabinet Committee on HIV/AIDS made of Ministers of the related line Ministries. (Neupane and Njie, 2007).

**Figure 3: National HIV/AIDS Coordination Structure (Source: Neupane and Njie, 2007)**

According to the most recent study (Neupane and Njie, 2007), Zambia Health Sector-wide Approach (SWAp) structure is quite well organized. Unlike the CCM/Z that has the funding agreement as its implementation guidelines, the SWAp system is based on the single national strategy. As people with significant expertise in the area characterize it, the structure is strong and the rules and working procedures have been well developed since its creation in 1992.

Indeed, more than 15 years in function supported by the clear structure and responsibilities for each level would not make Zambia’s SWAp worse than current CCM, and the obvious advantage is that it would eliminate the parallel structure that the CCM/Z currently represents. The National HIV/AIDS/TB/STI Council itself that is already doing most of the work of the
CCM/Z, including its administration, great portion of work on the proposal development and responsibility for decision-making, contains a structure highly similar to the CCM/Z. The Board of the National HIV/AIDS/TB/STI Council has composition almost identical to the CCM/Z in terms of representation, missing only the cooperating partners, the donors. Unlike in the CCM/Z, in the National HIV/AIDS/TB/STI Council decision-making is done on the technical level, therefore balance of power is different. As expatriate Programme Advisor to the National HIV/AIDS/TB/STI Council mentioned, the Council could fully perform the function of the CCM in the country, except that it lacks Malaria component. However, the Malaria Control Center could be used to run the Malaria component of the CCM.

Undoubtedly, further studies of the SWAp system in Zambia are needed in order to make any recommendations regarding the quality of its functioning, and the present study did not aim at this. However, it seems like it would be smarter for the Global Fund to build on and improve existing health management systems, rather than creating something new, especially considering the fact that the Global Fund has signed the Paris Declaration on aid effectiveness (OECD, 2005). In fact, lack of harmonization with existing health initiatives and budget support and the general failure of the CCMs to do so, has been previously criticized, as in many countries malaria and HIV/AIDS control programmes are still executed in parallel, without even a minimum dialogue across programmes (Lorenz and Wyss, 2007). Harmonization of donor efforts in the country has higher potential at improving overall effectiveness and efficiency of the Global Fund’s money coordination and relevant decision-making regarding its spending. Besides addressing the issue of efficiency and effectiveness, this would also address other components of good governance that the CCM/Z experiences problems with.
6. CONCLUSION

Present study conducted in Zambia in November-December 2007 has indicated that the Country Coordinating Mechanism of Zambia experiences troubles complying with the standards set out by good governance concept based on the model of the World Bank. Referred by the Global Fund’s Executive Director as the star performer in implementation of the Global Fund’s grants, CCM of Zambia, the largest recipient per capita of the Global Fund, fails to embody good governance. While there is a structure in place aimed at creating good governance in the country, this very structure fails to actually do so and experiences significant problems throughout the good governance concept’s components, which are accountability, effectiveness and efficiency, equitability, inclusiveness, participation, predictability and transparency.

It is important to note that the Global Fund has never intended to create such confusion. What the Global Fund meant to do was to create good governance mechanisms in recipient countries to ensure that money given to the country are used in the most effective and efficient manner. Initial idea was to strengthen the existing in-country structures, but not to create something new. Large mistake was that the Global Fund ended up developing such rigid guidelines for the country coordinating mechanisms hoping to ensure good governance, so most of the countries like Zambia were forced to develop a completely new governance structure – the Country Coordinating Mechanisms. However, in the era of harmonization and alignment of national and donor efforts, the CCM seems to be redundant.

Indeed, the CCM was conceived from a very theoretical standpoint. It is based on a standard blueprint, takes the form of conditionality that has proven to be ineffective in the past, and does not take into an account the country realities, power relations, political culture, state of civil society development, and individual capacity of the people. On the contrary, it presumes universal applicability of the good governance concept. Perhaps CCM can be functional in the environment where there is minimal or no competition for funding between the stakeholders and where not the funding drives the response, but vice versa – response drives the funding. Unfortunately, in developing countries this is usually not the case. While aiming at building good governance through CCM, in practice, when analyzed through good governance perspective, the Mechanism can hardly comply with the concept. The present study has shown this on the example of the Global Fund’s largest per capita recipient and the Global
Fund’s “star performer” - Zambia. This raises questions regarding overall implementation of the Global Fund’s grant in the country and the money meeting the intended purpose in the most effective and efficient manner. Moreover, this questions concerning the Global Fund’s grant management by less successful recipient countries than Zambia.

It is acknowledged, however, that the good governance concept used for the analysis is rather limited and does not uncover deeper processes that perhaps could explain and justify the status quo, even though an attempt was made to incorporate quality-oriented components in the analysis. The conclusions of the study were largely based on the interviews with the CCM/Z members and external key informants, and the researcher did not witness the CCM/Z at performing its functions due to the shortage of time. Deeper integration of the researcher in the CCM/Z processes would provide a stronger ground for the conclusions. Nevertheless, the present study can serve as the basis for further elaborations and research.
REFERENCES


Doupe, Andrew & Flavell, Stuart (2004) A multi-country study of the involvement of people living with HIV and AIDS in the Country Coordinating Mechanisms (CCM), Amsterdam: GNP+


Lancaster, Carol (1999) *Aid to Africa: So Much to Do, So Little Done*, University of Chicago Press, Chicago

Leftwich, Adrian (1994) “Governance, the State and the Politics of Development”, *Development and Change* 25, no. 2


President’s Emergency Plan for AIDS Relief, Partnering to Prevent Malaria in Zambia, [http://www.pepfar.gov/PPP/c22130.htm](http://www.pepfar.gov/PPP/c22130.htm) retrieved on 2008-03-12


World Health Organization, World Health Statistics, Zambia Country Profile
http://www.who.int/countries/zmb/en/, retrieved on 2008-05-17

Appendix 1: STANDARD INTERVIEW GUIDE

Present interview guide is a standard version containing all the questions addressed to the interviewees. The final choice of questions listed below varied depending on the type of the interviewee and the course of the interview. The guide served as a backup for the researcher during the interviews. The questions are partially based on the CCM Performance Checklist (2006b) developed by the Global Fund to assess compatibility of national CCMs with the Global Fund’s requirements.

1. How would you generally assess the work and performance of the CCM?
2. What functions does CCM perform in Zambia? What exactly does it do?
3. Is it a separate entity or integrated into the existing state institution (e.g. NAC)?
4. Does it perform its duties and responsibilities in a satisfactory manner?
5. How would you assess the CCM Secretariat?
6. Is CCM Secretariat supported by your organization and other members?
7. What role does you/your organization perform in the CCM?
8. Would you say your organization has equal voice within the CCM?
9. Would you want more power for your organization within the CCM?
10. Would you say that all members enjoy equal voices within the CCM, full rights to participation, expression and involvement in decision-making?
11. Are there any conflicts arising between different parties and who exactly?
12. Does CCM really work as a consensus-oriented and true partnership group?
13. Is there any favoritism of one party from the side of the Chair or Vice-Chair?
14. Who of the members has more influence within the CCM?
15. In other CCM there has been evidence of all decisions made within the CCM being dominated on the governmental institutions (e.g. MOH). Would you say this is the case in Zambia?
16. Were the CCM members selected directly or indirectly by the government/MOH?
17. There were cases when MOH manages the functions of proposal development and project monitoring with little participation from the CCM;
18. Does the Government/MOH see the CCM as an eligible partner or a mechanism of access to the funds?
19. What weaknesses in your opinion the CCM has?
20. What modifications to its structure would you suggest?
21. Do you think CCM in any way affects the implementation of the Global Fund’s grant?
22. Is the role of the CCM actual or more symbolic as responding to the Global Fund’s requirement?
23. Have you heard of any conflict of interest (corruption cases) within the CCM?
24. Is there bias within the CCM when it comes to decision-making? Do any of the parties represented have more influence and power?
25. Are the decisions made by the CCM transparent? Do you get notification on the decisions made?
26. Do CCM members and non-members receive the information in transparent manner?
27. How were Principal Recipients selected? Was CCM involved in selection of the PRs? Did you participate in the selection process?
28. Does CCM participate in decision-making on allocation and implementation of the grant funds or is it a prerogative of the Principal Recipients?
29. What process was in place during the selection of the CCM members?
30. How were representatives of different constituencies selected?
31. How were representatives of bilateral/multilateral development partners selected?
32. How was the CCM member representing your constituency (e.g. donors, government, academic, private sector, people living with HIV/AIDS, religious/faith-based organizations) selected? Was there an open democratic selection process in place?
33. Are you satisfied with the performance of the person representing your constituency?
34. Was the attendance of the CCM meetings by the members satisfactory?
35. Are there any measures provided in case of non-attendance of the meetings by a member?
36. Are the meetings open to everybody who expresses the wish to attend it?
37. Are non-CCM stakeholders being informed on the CCM meetings taking place?
38. Does the CCM have a documented transparent process to ensure the input of a broad range of stakeholders in the proposal development process and implementation oversight?
39. Is your constituency represented at the highest level?
40. Does the CCM include representation from states/provinces/districts?
41. When taking decision is there a consultation process with the members of your constituency? If yes, how exactly does it happen? Is this process documented?
42. How often do CCM meetings take place? Do they take place regularly? Do you consider frequency and number of the meetings adequate?

43. Does CCM member representing your constituency have access to key CCM documentation?

44. Does each member of the CCM have equal access to key documentation?

45. Does CCM Secretariat inform all the members on the meetings and share relevant information/documentation in advance?

46. Is your organization a recipient of the Global Fund’s funding?

47. How does voting process take place? Is there a set mechanism? What is the established quorum for the decision to be made? Does every member have equal vote? Does the Secretariat have equal votes or more influence in decision-making?

48. Was the proposal writing process public? What mechanisms were in place to keep the public aware of the process?

49. Who are the CCM members legally accountable to? Is there any mechanism of public accountability of the CCM members?

50. Is there any policy of conflict of interest avoidance?

51. What constituencies does Chair and Vice-Chair represent?

52. Are the Chair and Vice-Chair from different constituencies?

53. Are the Principal Recipients from the same constituency/entity/group as the Chair or Vice Chair?

54. Does the CCM have written Constitution or ToR and operating procedures?

55. Has the CCM membership list been made public in the country?

56. Are the meetings being moderated in a consensus-oriented manner? Is there informal pressure from the Chair or any of the members?

57. Is there performance self-assessment mechanism in place?