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The National Strategic Plan of South Africa: what are the prospects of success after the repeated failure of previous AIDS policy?

CITATION

Wouters E, Van Rensburg HCJ & Meulemans H. 2010. The National Strategic Plan of South Africa: what are the prospects of success after the repeated failure of previous AIDS policy? *Health Policy and Planning*, 25(3): 171-185.

ABSTRACT

Hitherto, the story of HIV/AIDS in South Africa is, to a large extent, one of lost opportunities. Whereas the country has one of the worst epidemics in the world, consecutive national AIDS strategies have been repeatedly marked by failure over almost three decades.

Understandably, South Africa's most recent HIV/AIDS policy, the HIV & AIDS and STI Strategic Plan for South Africa, 2007-2011 (NSP), has been greeted with general acclaim. However, what are its real prospects of success against the backdrop of the repeated failures of the past?

The first objective of this review is to systematically identify the core reasons for past policy failures. Using a comprehensive analytical framework, this article presents a systematic review of the literature on post-apartheid AIDS policy in South Africa. The analysis demonstrates that a complex interplay among the content, context, actors and process of AIDS policy created a gap between policy making and policy implementation, which rendered near-ideal AIDS policies ineffective.

Secondly, we evaluate the chances of success of the current NSP by examining both the policy-making phase and the resulting policy document in light of the reasons for past policy failures. Our analysis shows that the NSP contains dynamic and comprehensive policy content, sensitive to the socio-economic and cultural dimensions of HIV/AIDS. However, many of the political actors that hampered treatment implementation in the past, and who deepened the gap between government and civil society, are still in office. Monetary and human resource shortages also create a policy context that is infertile for the implementation of a comprehensive HIV/AIDS strategy, as envisaged in the NSP. Finally, these health system restrictions have a clear negative impact on the process of policy implementation. Without the mobilization of people living with HIV/AIDS and their communities, the NSP will be ineffective in bridging the gap between policy intentions and policy implementation.

The strength of this article lies in its systematic analysis of previous policy responses, as a basis for appraising current AIDS policy. Although such an approach tends to simplify the complexities of the actual policy environment, it nonetheless draws to the attention of policy participants the importance of and the complex interrelationships among the different dimensions of AIDS policy.