Indicators of NGOs Success & Impacts on NGOs Role in HIV Policy Process in Kenya

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Abstract
NGOs have been actively involved in both global and national policy processes resulting to promotion of human rights. However, NGOs involvement in policy process heavily depends on their success, since policy makers choose to engage only successful NGOs. In determining whether NGOs are successful, indicators of NGO success should be evident in their operations. This thesis focuses on three indicators of NGOs success namely, sufficient resources, embeddedness in the community and an already established success in the country where they are geographically located, with an aim to show that successful NGOs have a role in policy process and such NGOs promote enjoyment of rights such as right to health and freedom from discrimination. The indicators are related to each other and are equally important for an NGO to gain success. Therefore, indicators of NGOs success have great impact on NGOs success that has an impact on NGOs role in policy process.

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Key words: Human Rights, HIV/AIDS, Kenya, NGOs, Policy, and Success.
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<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>APHIAplus</td>
<td>AIDS, Population and Health Integrated Assistance</td>
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<td>ARIFU</td>
<td>AIDS Response in Forces in Uniform</td>
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<td>ART</td>
<td>Antiretroviral Therapy</td>
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<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<td>CEDAW</td>
<td>The Convention on the Elimination of all Forms of Discrimination against Women</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CTA</td>
<td>Call to Action</td>
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<td>EGPAF</td>
<td>Elizabeth Glaser Pediatric AIDS Foundation</td>
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<td>EMTC</td>
<td>Elimination of Mother to Child Transmission</td>
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<td>FHI 360</td>
<td>Family Health International</td>
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<td>HENNET</td>
<td>Health NGOs Network</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus Infection and of Acquired Immune Deficiency Syndrome</td>
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<td>ICESCR</td>
<td>International Covenant on Economic, Social and Cultural Rights</td>
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<td>KENWA</td>
<td>Kenya Network of Women Living with Aids</td>
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<td>KNASP</td>
<td>Kenya National AIDS Strategic Plan</td>
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<td>MCC</td>
<td>Male Circumcision Consortium</td>
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<td>NACC</td>
<td>National AIDS Control Council</td>
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<td>NAP</td>
<td>National AIDS Program</td>
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<td>NASCOP</td>
<td>National AIDS and STI Control Program</td>
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<td>NGOs</td>
<td>Non-government Organizations</td>
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<td>NHP</td>
<td>Nutrition and HIV Program</td>
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<td>PATH</td>
<td>Programmes for Appropriate Technology in Health</td>
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<tr>
<td>PEPFAR</td>
<td>President’s Emergency Plan for AIDS Relief</td>
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<tr>
<td>PLWHA</td>
<td>People Living With HIV and AIDS</td>
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<tr>
<td>PMTCT</td>
<td>Prevention of Mother to Child Transmission</td>
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<tr>
<td>UNICEF</td>
<td>United Nations International Children's Emergency Fund</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<tr>
<td>VMMC</td>
<td>Voluntary Medical Male Circumcision</td>
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<td>WHO</td>
<td>World Health Organization</td>
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1. Introduction

Non-Governmental Organizations (NGOs) in Kenya have been working with HIV issues since the 1980s when the first cases of AIDS were noted. Among the first HIV NGOs was a local based organisation called Kenya Network of Women Living with Aids (KENWA) that was founded by a HIV positive female nursing student with intentions to connect people who understood the challenges of living with HIV. Except the NGOs, nobody else addressed the HIV problem because any talk about HIV was perceived as criticism against the government (Labov, 2002). Despite the fact that AIDS was already a global concern, it took 20 years for the Kenyan government to address HIV/AIDS issue because the ruling regime was concentrating on challenges of political instability and heavy institutionalization of ethnic divisions in the country and was wary that accepting the reported HIV cases would affect the tourism industry (Booth, 2004; Humphreys and Lieberman, 2011).

My concern is not the reasons why the Kenyan government did not respond, but the role of NGOs in working with HIV/AIDS in Kenya. Therefore, the focus of this paper will be to address the success of NGOs in working with HIV/AIDS and determine whether their success has an impact on their roles.

Different actors, among them international organizations, governments and civil societies have been engaging in programs that support and strengthen HIV/AIDS policy in Kenya. NGOs have been relevant non-state actors and they have been actively involved in shaping public policies and they directly and indirectly influence state decisions (Szazi, 2012). In Kenya, NGOs have been active within community development projects (Brass 2012; Labov, 2002).

The more successful an NGO is – in terms of sufficient resources, strong establishment and connectedness in the host country - the more likely it is to be engaged in policy process. Therefore, indicators of NGOs success are important in assessing the role of an NGO in policy process because policy makers engage successful NGOs in the process. (Fitzduff and Church, 2004). These NGOs are assumed to be presenting public interest, are driven by public interest purpose in their goals, and that they are independent from any government control (Szazi, 2012), in order to give them room to work for the community they serve. In this way, NGOs role in policy process promotes human rights. For instance, NGOs working with...
HIV/AIDS promote equality through stigma reduction campaigns, which has led to introduction of HIV/AIDS education in school curriculum (Kenya National HIV policy).

1.1 Relevance to Human Rights
Relationship between roles of NGOs and human rights are connected both directly and indirectly due to the fact that NGOs represent public interest in which their goals are set (Szazi, 2012). In this case, public interest is interpreted as presenting the voice of the people in the community in which human rights norms are established and implemented. Therefore, focusing on indicators of NGO success to show that successful NGOs are engaged in policy process (Fritzduff and Church, 2004) is important because their role promotes human rights.

In Kenya, individual status in HIV/AIDS has been accompanied by complains of human rights violations. These violations have occurred in cases where HIV positive individuals have been discriminated against at places of work, and have been rejected in the society due to stigmatization associated to being HIV positive. Since in the 80s, NGOs have been working with HIV/AIDS projects in Kenya and the NGO sector has been seen as a success and advantageous to human rights (Brass 2012). Hence, the results of this thesis will help to identify what successful NGOs do and their role. Thus, getting a model of NGO operations that highlights successful strategies for the future and can be applied to other NGOs involved in HIV/AIDS related programs in Africa, leading to a promotion of human rights.

1.2 Aim and Research Problem
The aim of this paper is to show that successful NGOs have a role in policy process, and that indicators of NGO success have an impact on NGOs role in policy process. This will analyse achieved through a comparison of three NGOs in Kenya outlining indicators of NGO success and their impact on HIV/AIDS policy. With the use of the selected NGOs, the thesis seek to give a clear picture of how successful NGOs look like in general and how the NGOs engage in policy process. However the conclusion drawn are more suitable for NGOs operating in developing countries.

There is a substantial literature on NGOs role in development and democracy (Edwards and Hulme, 1996; Fisher, 1997; Sansom, 2011; Bernal et al, 2014), but NGOs success and how they impact public policy especially in Africa is underdeveloped (Barr et al, 2005).
Thus, this thesis aims at giving a contribution to the existing literature on how successful NGOs have played a role in policy process.

1.3 Research Questions
To be able to accomplish the aim, which is to show that successful NGOs have a role in policy process, the following three research questions will be answered,

- What are the indicators of NGOs success?
- To what extent does NGOs success have an impact on NGOs’ role in policy process in Kenya?
- How have the selected NGOs promoted human rights in Kenya, specifically freedom from discrimination and right to health through their work in HIV/AIDS?

Success is defined as *achievement of prosperity, fame and social status* in which prosperity is seen as flourishing or a thriving condition, while impact is used as a *strong effect* on something (Oxford dictionary). In this thesis, determining NGO success definition is focused one a set of short-term goals that have won their mission including policy victories (Miller, 1994).

1.4 Theory, Method, Material and Source Criticism
The theoretical framework of this paper will be on indicators of NGO success because the role of NGOs on public policy depends on NGOs success (Bidaurratzaga-Aurre, 2012). Therefore, this thesis will outline the indicators of NGO success, and show that NGO success has an impact on the roles of NGOs in public policy. This will be demonstrated in the methods part but before then, other theories on NGOs will be analysed in order to give a thorough theoretical discussion.

The method in this thesis will be a comparative analysis of selected NGOs. A comparison of the selected NGOs cases will help to show how NGOs success can be determined and how the success has an impact on their roles in policy process. The NGOs studied here were selected because they have been actively involved in health issues in Kenya and have been collaborating with the government of Kenya. Particularly, they have been working with HIV since the first cases were reported.
The materials are collected from both primary sources such as HIV policy documents and NGOs reports. Secondary sources such as articles that have focused on selected area of study and organizations as well as books entirely devoted to data collection that has mainly involved field work will be used. Of great use will be primary literature from the organizations about their activities and programs, which lays out the goals, achievements and challenges of the NGO. More so, media articles regarding NGOs and copies of government laws and policies regarding NGOs will be used to shed more information on the nature of NGOs in Kenya. Using archival materials for this thesis will be advantageous because the documentation is stable and can be reviewed repeatedly. Documentation covers a specific occurrence and using it to examine a particular aspect in a case gives a broad coverage of the case studied.

Although there are limitations of biased selectivity and reporting from the reports, it is easier to identify the biasness since they were not made for the case study at hand (Yin, 2014). In addition, the choice of selected organizations was much influenced by availability of data because, according to NGOs Co-ordination Board of Kenya, there is no available information about all of the organizations in Kenya, what they do or whether they are operational. Further on, collaboration of the NGOs with the Kenyan government and the nature of the NGOs donor were also a key factor in selecting which NGOs to analyse because impacts on policy has involved both the Kenyan government and donors (Brass, 2012). The donors identify performing NGOs to facilitate their funds. Thus selected NGOs are validated by the kind of donors who fund them since the NGOs are subject to direct monitoring.

1.5 Delimitations
This paper will only focus on the selected organizations in order to assess their success on HIV policy in Kenya. Although other institutions such as United States Aid on International Development (USAID), World Health Organization (WHO) and government of Kenya has been key players in HIV policy process in Kenya, they will be discussed when it is relevant in this thesis. This will help to keep the focus of the thesis on determinants of NGO success and how they impact their role on policy process.

With the methods, I will do a comparative study based on case studies of only the three selected NGOs that I will study individually by relying heavily but critically on interviews and observations conducted by other researchers. The three organizations will give a clear
picture of a successful NGO since they have been actively involved with the HIV policy in Kenya.

In theoretical framework, I will discuss the indicators of NGO success will. It is not the most comprehensive way but it is part of success measures in regard to overall impact on policy process, and the indicators are equally evident in the three organizations. Therefore, they give the best basis for comparative analysis I intend to use for in this thesis.

However, the foreseen setback is lack of critical materials that have analysed the role of NGOs in policy process in Kenya of both successful and unsuccessful NGOs. This may not affect the study of the thesis but would have been an advantage to give more validation of the thesis argument that successful NGOs have a role in policy process and on what are the indicators of NGOs success.

1.6 Chapter outline
The following chapters will be as follows: Chapter two will be divided in two sections. First I will discuss the theory of NGO success outlining the indicators that determine the success. This thesis will embrace three indicators namely, resources, embeddedness and established success. The other section will discuss the methods used to analyse success of the selected NGOs and their role in policy process.

Chapter three will have three sections. The first section will highlight a short background on the situation in Kenya in connection the boom of NGO sector and NGO definition, the second section will be on development of HIV policy in Kenya while the third section will be on how NGOs promote human rights in Kenya.

Chapter four will present the empirical data of the thesis. This will be an in-depth description of the selected organizations. I will describe each organization, highlighting the work within HIV/AIDS, the role in HIV policy and how the NGOs promote right to health and freedom from discrimination in Kenya.

Chapter five will give an analysis of the organisations outlining how their operations are related to the three indicators of NGO success, and the relationship of their success and the role on HIV policy in Kenya
Lastly, chapter six will include three parts. First will be a summary that will give a recap on the main ideas and the position of the thesis. Second will be a conclusion that will give the findings of the thesis based on the analysed materials and finally a call for further research within the research area of this thesis.

2. Indicators of NGOs success and comparative analysis

This chapter will have two main sections on theory and method. In the first section, I will outline the theoretical framework of this thesis that is based on indicators of NGOs success namely, sufficient resources, embeddedness and connectedness with other organizations, community and institutions, and established success in the country where NGOs are based. As well as respond to critics of these indicators.

However, before discussing the indicators mentioned above, I will highlight other indicators of NGO success in order to give a comprehensive discussion of the literature on NGOs, and the reason why each indicator is not considered to explain NGO success in an in-depth way in relation to this thesis. These factors include failure of states, role of NGOs as agents, independence of NGOs, NGOs as competitors of the state and nature of NGOs work. The second section will present the comparative analysis method as a case study that will be used to analyse the materials of this thesis. First giving reasons of the case selection, then highlighting NGO existence and role in public policy and lastly case study methods.

2.1 Theory

Theorizing of NGOs has taken different routes mainly in globalization, state and neo-liberalism discussions (Bernal et al, 2014; Castells, 2008). In globalization debate, NGOs exist in the international arena where they are not subject to any sovereign power but they are shaped by interconnectedness of states, institutions and global non-state actors (Castells, 2008). Therefore, NGOs are seen to be a part of global civil society (Castells, 2008, p. 83) that has emerged due to failure of nationally based systems to manage world issues at a global level (Umeh and Ejike, 2004). Although globalization theory points out failure of states as an indicator of NGO success, it does not exclusively indicate how the NGOs engage in policy process without collaboration with the host state that have already failed to manage world issues despite NGOs being established in territorial states. Failure of a state does not necessary mean NGOs operating in that states are successful.
In relation to states, works on NGOs remain divided (Bernal et al, 2014). However NGOs agency role is argued to be an indicator of NGO success. Some scholars argue that NGOs are agents of development (Mehra, 1997; Holmen and Jirström, 2009). More so, donors and governments have been involving NGOs as partners in development process, and on the other hand, NGOs have demonstrated an interest in various areas of development (Fowler 2000; Holmen and Jirström, 2009; Bernal et al, 2014). However, the differences in NGOs role are not included. NGOs play different roles as agents and how they get involved in policy process vary. Therefore, there is a need to outline clearly how NGOs achieve agency role and how they operate in their capacity as NGOs. Noting that not all NGOs engage in activities that necessarily promote policy development or implementation, this indicator is inadequate.

Another indicator of NGO success is said to be the position of NGOs as competitors and that NGOs stand in opposition to a state (Bratton 1989, Clarke 1998; Bernal et al, 2014). In addition, NGOs have been seen as agents of neoliberalism and that they weaken the host states (Funk, 2014; Kamat, 2004; Hearn, 2007; Parrot, 2004). However, critics have dismissed this factor and argue that NGOs adopt entrepreneurial and accounting strategies that demonstrates a move to neoliberalism (Feldman 1997, Elyachar, 2003). Taking NGOs that engage in charitable works, the claim that NGOs are competitors is far-fetched because the competition with state can be seen as assistance to the states. For example the government ministries collaborate with NGOs to achieve certain outcomes agreed upon by the state and the NGOs.

On independence, classical liberal theory gives a clear differentiation between public versus private and civil society versus state. They argue that NGOs are transnational civil society (Brown and Timmer, 2006; Zoller, 2007). NGOs are classified as private sector and as part of civil society. They are perceived to be working on their own without interference from the states, thus asserting that independent NGOs are successful. In line with this liberal idea, Herbermasian theory on public sphere suggests that NGOs are not formed from within the state, and therefore, NGOs lie independently between the state and the society (Torgerson, 2010; Castells, 2008). Castells states that NGOs engage in public opinion matters, which are independent from state and are therefore successful because they are able to express the views of the people (2008 p. 89).
On the other hand, poststructuralist theory focuses more on the working of the NGOs as an indicator of NGOs success, their strategies and how they are ruled, and their relationship with states, donors and their staff members. Therefore, they focus more on the entrepreneurial side of the NGOs (Bernal et al, 2014 p. 7), although NGOs are considered to be non-profit institutions. Best representative model in working of NGOs is the economic handbook, which highlights the history of NGO sector and supports its existence with economic and political theories (Schiff, 1987) in line with poststructuralist ideas. Since, NGOs have a diverse focus, taking their working as a determinant of success may not give much in a comparative analysis because of a high margin in the NGOs differences. Furthermore, NGOs operate as non-profit institutions and it is difficult to determine their success based on their work.

The other indicators that are most suitable for this thesis are sufficient resources, embeddedness in the community and established success. These concepts fit best in analysing the selected NGOs because they are comprehensive and apply to all the organizations unlike the indicators discussed above. I will discuss each one of them in the next section and relate them to successful NGOs and highlight their impact on NGOs role in policy process. After that, I will highlight the critics of the three indicators of NGOs success and give a response in relation to this thesis.

2.1.1 Sufficient Resources

Resources of NGOs can be classified in two ways namely finances and manpower. Most data on NGOs resources has been devoted to finances, while just a few has concentrated on manpower (Barr et al, 2005). Both financial support and manpower are equally important for an NGO success. The latter influences the NGO operations since NGOs are created with diverse goals. Some strive to achieve recognition while others try to link state and community together (Bernal et al, 2014; Smith 2010; Villicana, 2013).

For financial support, NGOs in East Africa have a great dependency on external support from foreign NGOs and /or donors (Barr et al, 2005). NGOs operating in developing countries have received huge amounts through donor investments. This is clearly reflected in the budget allocation of USAID, which gives foreign assistance through development programs (USAID; Hearn, 1998).
Indicators of NGOs Success and Impacts, on NGOs Role in Policy Process in Kenya

NGOs act as agents between the donors and the beneficiary communities (Villicana, 2013). These communities are mostly poor and wholly depend on NGOs support. Therefore, one of the challenges that face NGOs is lack of funds (Seckinelgin, 2005). Some NGOs rely on funds from government support and public sector payments. This is mostly insufficient due to hefty application process, and high demands from the government. When NGOs does not have sufficient funds, their projects are at a risk of failing. Therefore, an NGO without sufficient funds cannot keep devoted to its charitable works. Instead, the efforts diverge from charitable works to competition with private business sector (Barr et al 2005).

In addition, manpower is solely directed to NGOs activities of planning and implementing fund generating projects. In contrast, an NGO with greater access to resources tends to enjoy a focused strategy and donor-specific advantage (USAID, 2006) thus, resulting to a great success due to ease in project management. This allows the NGOs to pursue their mission instead of concentrating on funds campaigns.

A study conducted on success of grassroots projects indicated that NGO success is greatly dependent on sufficient finances, competent skills in leadership and management, and an existing network with other local and international NGOs (Barr et al, 2005; Kraeger, 2011). Therefore, manpower is equally important to success of an NGO. Competent skills in leadership and management are important for overall running of an NGO. Therefore, highly trained and skilled staffs promote NGO success at high level. Individuals who have experience and educational background above national average in developing countries mostly manage NGOs that are considered to be successful (Barr et al, 2005; Holmen and Jirström, 2009; Labov, 2002). As Brass stated, “NGOs are formal organizations often staffed by highly educated cosmopolitan people...........” (2012, p. 210). This implies manpower is a strong aspect of NGO operations and due to the nature of their employees, they are perceived to be well suited to speak on behalf of the people they represent in a national and/or international forum.

In policy making, states usually engage NGOs that have sufficient finances in the policy process. (Fritzduff and Church, 2004). So, funds are an important factor if an NGO intends to get involved in policy processes in a state whether through invitation or through influence. Well-funded and well-managed NGOs mostly claim their right to engage in formal decision-making processes as official or semi-official representatives (Holmen and Jirström, 2009;
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Kraeger, 2011). Therefore donor assistance and skilled manpower has greatly contributed to NGO success but only if the organizations pursue goals that are widely accepted in the local community (Sundstrom, 2006). This leads to the next theory of NGO success, which is embeddedness and connectedness in the community.

2.1.2 Embeddedness and connectedness in the community

NGOs have “become a very important part of the social landscape” (Castells, 2008 p. 83) even though sources of organizations are diverse from religion, culture to politics. Most of the sources are strongly established in the communities in which the NGOs are based. Social determinants of certain aspects in a community may act as a barrier for NGOs breakthrough in that community. For example, a study done in Malawi on NGOs dealing with HIV/AIDS indicated that poverty is inseparably associated with HIV/AIDS. Thus, women engaged in sexual relationships to get food for their children (MacIntyre et al, 2013). In such circumstances, NGOs goals must integrate social issues in their programs in order to deal with HIV/AIDS within such a community. Furthermore, governmental institutions responsible for policy making are derived and based on the community since the government represent the people at the legislature.

An NGO require acceptance and trust by the people they seek to serve. In most cases, communities are themselves aware of their needs (Mehra, 1997). The awareness influences NGOs decision in programs they focus on because the NGOs aim to have an impact on targeted population. Therefore, inclusion of the community makes it easier to work towards set goals. An NGO’s community support develops if the community feel included in the NGOs agenda. If an NGO fails to identify with the community, the NGOs fail to build a lasting relationship with the community leaving less chance for trust and co-operation between the community and the NGOs (MacIntyre et al, 2013). A strong bond with the community is important for an NGO to excel.

Establishing tactical associations is an important strategy to facilitate lobbying or campaigning at all levels in efforts to achieve set goals (Bebbington et al, 2008; Brass, 2012). NGOs have been claimed to give a voice to the people particularly on their outspoken humanitarian focus, thus speaking for the poor and less advantaged. In undeveloped countries, the poverty rate is quite high. Therefore, NGOs speak out for majority (Holmen and Jirström, 2009). In this case, NGOs come together and address issues from a community perspective,
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raising their acceptance within the community. More so, civil societies have raised demands to have NGOs officially involved in decision-making processes (Holmen and Jirström, 2009) hence, NGOs connected to local arena of the community implement their programs successfully.

NGOs that engage in political activities should have a great connection with the community because they are agents of public opinion (Castells 2008). To present public opinion NGOs must be well informed and connected to the community they serve. For instance, most NGOs projects such as democracy promotion, environment protection, human rights etc. can be categorized under the term “community development” (Castells, 2008 p. 84) this implies that the community being developed and the NGO work together to accomplish similar mission. Therefore, a strong connection between the NGO and the community leads to success.

Networking with other NGOs, local community and other agents eventually pays off the success. This is because different actors need each other at different levels because they have diverse roles in development and implementation of policy. Strong linkage of an NGO to grassroots organizations and the government of the host country have been argued to be among the factors to success (Barr et al, 2005) because policy institutions are influenced by the government and the local arena. More so, limited community-based approach among NGOs leads to a less effect on projects success (Barr and Fafchamps, 2006; Bechange, 2010). In circumstances where NGOs engage in community participation, the NGOs get well connected to the client-community, making it easy for the NGOs operations. NGOs have continuously acknowledged a community-based approach have greatly contributed to success in operating their projects (Labov, 2002).

Grassroots involvement of NGOs is key to community empowerment, thus making the NGOs’ goals easily achievable (Matlin et al, 2007). Being in agreement with the political arena of the host country gives NGOs an opportunity to be involved in national debates. This increases NGOs strength and visibility resulting to governments getting interest in collaborating with such NGOs. NGOs who have engaged in political activities that mobilize populations, lobbying etc. are considered to be successful (Barr et al, 2005) and are mostly included in policy processes.
Since NGOs are often chosen to mitigate the impact of a range of issues within a society, they must secure community trust (Maclntyre et al, 2013; Holmen and Jirström, 2009). NGOs acceptance is based upon the relationship between NGOs staff and the local community, which is crucial in building community trust. Running programs from a community perspective through community participation in achieving shared goals greatly increase trust (Hershey, 2011). This supports the argument that local support is important for an NGO success.

2.1.3 Established success in the countries where NGOs are based

Although not widely developed, the number of main program areas has been noted as a determinant of NGOs success (Bechange, 2010; Parrott, 2004). In a survey on NGOs in Uganda, most NGOs are actively involved in diverse activities under a broad topic. For example “raising awareness” that represent HIV/AIDS and other health issues, nutrition, gender issues, human rights as well as environment protection (Barr et al, 2005 p. 11). With such general terms, NGOs get a lot of flexibility in type of issues they can engage in, as well as the kind of grants they are eligible for. Thus, their establishment grows rapidly resulting to success (Barr et al, 2005). NGOs are able to work in a wide range of activities targeting a wide range of population resulting to NGO set up in a state.

Personnel who work for NGOs strengthen establishment of the NGO. This is because directors who work for NGOs have prior experience in working with NGOs (Barr et al, 2005) and has an already established network with other NGOs and local government institutions. For this reason, they are obviously well connected both locally and internationally leading to strong establishment of the NGO. They represent the NGO and they are symbolic for the organizations that they worked for.

In policy process, NGOs with “loud voice” are often engaged (Fritzduff and Church, 2004, p.12). To consider an NGO as loud implies that there must have been an already existing recognition. An established NGO becomes influential through community development agendas. This makes it recognized in the host state and gains a status of a well-established NGO. Often, NGOs lead the way (Mehra, 1997) in strengthening the community. However, NGOs that lead must be first accepted by the people they serve, recognized by the host countries, trusted by the donors and accountable for their deeds.
Finally, a wide geographical reach of an NGO (Barr and Fafchamps, 2006) within a community is important. An NGO that is well known in the community is trustworthy. In order to be known in a society, an NGO must set up projects in collaboration with different communities and targeting different populations. This contributes greatly to NGOs establishment. However, the kind of community in which NGOs choose to operate should be carefully selected. Particularly, poor communities appreciate NGOs work compared to more prosperous communities, although most flourishing NGO exists in the wealthiest regions (Sundstrom, 2006).

The reason this thesis embraces the three factors as important indicators of NGOs success is because they are closely related to each other. With sufficient resources, NGOs are able to work together with other actors resulting to an establishment in their working stations. Therefore, each indicator is important in determining NGO success.

2.1.4 Critiques of indicators of NGO success

The three factors I have chosen for this thesis have been criticized as being inaccurate determinants of NGO success. To begin with, reasons for NGOs founding has been a key analysis on whether they still can be claimed to be successful (Holmen and Jirström, 2009). NGOs have been claimed to have a humanitarian focus that represent the community. However, they have been accused to serve the interest of their donors and members (Sundstrom, 2006; Norma, 2014). Therefore, the criticisms that such NGOs cannot be embedded in the community and the idea of established success is farfetched because the NGOs accredit themselves.

Secondly, measuring NGO success based on their resources has been seen as inappropriate because some NGOs are founded as a strategy to accumulate funds from donors. On manpower, developing countries rank higher in the rate of corruption (Smith, 2010). So, NGOs cannot work for the interest of the community, and instead they are profit oriented. Further more, employment is not based on competence and skills of the staff due to high rate of corruption and incompetence in developing countries.

In response to the above critiques, the NGOs studied in this thesis were selected depending on two things. First was the kind of donors who fund them and second is their international focus. Among the main donors is USAID who identify performing NGOs to facilitate their
funds (USAID, 2006; Hearn, 1998). Thus selected NGOs are validated through such kind of donors since the NGOs are subject to direct monitoring. Another donor who has funded these organizations is the Bill and Melinda Gates foundation that advocate for transparency on NGO spending (Gates foundation, webpage) thus, these organizations are held accountable and responsible for resource utilization. As a result, the organizations implement their set goal and in the process, they give service to the community and in return the community-organization trust is built. Thus, connectedness and networking of the organizations get stronger and credibility of the organization is established.

On manpower, the NGOs operate in many countries and their head offices are in developed countries. Therefore, an international team who are held accountable for the NGOs supervises their work in Kenya. This makes it less likely to engage in corrupt practices during hiring process. Furthermore, studies on NGOs employees in developing countries indicate that they have higher qualifications than average of their countries (Brass 2012; Holmen and Jirström, 2009; Labov, 2002; Barr et al, 2005). This asserts that NGOs staffs are skilled and qualified to hold their respective positions as employees.

The representation question in which the NGOs seems irrelevant because the governments are perceived to represent their people, NGOs do not necessarily, place their representation on a vast numbers of members (Jordan, 2003; Mishra, 2012) but on expertise, popular support or moral imperatives. In this thesis, the selected organizations put their legitimacy more on expertise (PATH, programs).

2.2 Method

Relying heavily but critically on interviews and observations conducted by other researchers, I will do a comparative analysis inform of case studies of three NGOs. This will tie the thesis aim together with the theoretical framework of NGOs success on HIV/AIDS policy in Kenya, which is the working ground of this paper. NGOs success is a primary factor in determining the role of an NGO. In this multiple-case study, the idea will be to construct a general explanation of NGOs role and success in HIV/AIDS policy, even though the NGOs will vary in details because the NGOs target diverse populations and use different strategies in an attempt to lower HIV transmission rate in Kenya.
In the following section, I will firstly highlight the reasons for choosing Kenya, the three organizations and HIV policy as a unit of analysis. Secondly, the NGO existence and role in public policy in order to establish a general understanding of the thesis topic, and finally present case study method, which will be used as an analytical tool in this thesis.

2.2.1 Case Selection
The interest in analysing HIV policy in Kenya is influenced by two factors. Firstly, HIV/AIDS is among the most discussed issues in sub-Saharan Africa. It has been in the centre of regional policy agenda and different actors have taken initiative to address and curb the problem (WHO, HIV/AIDS). Among all people living with HIV in the world, 71% people live in sub-Saharan Africa that amounts to 25 million people of which 1.6 million live in Kenya (WHO, 2013). Secondly, and most important for this thesis is that despite NGOs being actively involved in HIV/AIDS related projects, do their success have impacts on their roles? This question guides this study because I will outline indicators that determine NGOs success, and relate them to the role of NGOs on HIV/AIDS policy.

Three foreign NGOs who have been working on HIV related issues in Kenya are selected in order to show how each of them has had an impact on HIV policy. These organizations have a diverse working focus but they are all categorized as health NGOs (HENNET, webpage). The reason for comparing these organizations is to show that successful NGOs have a role in policy process. This will be done through analysing their respective programs and assessing how they have contributed to HIV policy development in Kenya.

The organizations examined are Family Health International (FHI 360), which started working in Kenya in the mid-1980s focusing on technical support to family planning programs and help to shape the national HIV/AIDS response. Next is Programme for Appropriate Technology in Health (PATH), which has been working in Kenya since 1978, helping Kenya’s health care sector improve services and strengthen community networks while empowering Kenyans to adopt healthy lifestyles and integrating HIV/AIDS and other health services. Lastly, Elizabeth Glacier Paediatric Aid Foundation (EGPAF), which has been operating in Kenya since 2000 and works together with communities, civil society and the government of Kenya to reduce paediatric HIV transmission by supporting mothers and children.
Noting the first cases of HIV/AIDS were noted in the 1980s and Kenyan government non-response until 1999 (Labov, 2002), these organizations best fit for analysing success of an NGO working with HIV/AIDS in Kenya, and their role on HIV policy development. Another reason why these organizations were selected is because donors such as USAID, which has a record in funding organizations and institutions that are successful in their projects fund them. More so, these organizations have been actively collaborated with each other as well as with the Kenyan Ministry of Health and other government institutions. This collaboration has led to the organizations getting a role in HIV policy (Fritzduff and Church, 2004).

2.2.2 NGOs Existence and Role in Public Policy

There exist a vast of literature on existence of NGO sector with main methods of study used being legal studies, historical studies and case studies (Barr et al, 2005). Focusing on developing countries, legal studies has been exclusively been conducted by International Centre for Not-for-Profit Law (ICNL), which has been used as a source for regulations for non-profit organizations in many developing countries. On historical aspect, many have focused on evolvement and development of the NGO sector (Toeplar, 2003; Hershey, 2013; Booth, 2004). However, case studies are more often conducted for a particular organization (Edwards and Hulme, 1996, Farrington et al 1993, Barr et al, 2005). Nevertheless, the NGO sector still remains complex and diverse in developing countries and it is least understood (Barr et al, 2005; Bernal et al, 2014).

Studies on NGO sector have concentrated more on the cause of non-profit organizations existence. Main arguments are that non-profit institutions exist as a result of non-government response, peoples’ need to produce stuff for their own use, and failing donations, leading to a self–interest response in changing institutions (Barr et al, 2005; Lieberman, 2009; Booth, 2004; Hershey, 2011). Non-governmental response represents the Kenyan case on HIV/AIDS because the government failed to respond immediately to HIV paving way for NGOs to intervene.

In the global policy, there are no set rules of political engagement (Jordan, 2003: Mishra 2012) and various actors including NGOs take part either through invitation by other actors like states or through their power of financial resources. Therefore, the NGOs use their resource power to gain recognition in the state (Kim, 2011). They start locally with campaigns and use public mobilization to persuade policy makers to address an issue. More so, NGOs
create conditions for, and then participate in policy dialogues (Jordan, 2003; Mishra 2012). In Kenya, NGOs provide welfare and other services e.g. education, healthcare, women empowerment, employment, development, infrastructure etc. Kenya has acknowledged NGOs presence and power by integrating former NGO personnel into government, increasing the variety of voices heard in decision-making (Brass, 2012, Ng`ethe and Kanyinga, 2013). Using their highly skilled staff, NGOs also use formal interactions with institutions where policies are drafted, and convince national governments, which has central role in policy creation. The staffs hold the opinion based on public interest since NGOs they worked for represent public interest purpose in their goals (Szazi, 2012). This connects to role in policy with human rights because the public interest is in the good will of the people.

Since NGOs should be independent from any government control, they have been relevant non-state actors, being actively involved in shaping public policies and they directly and indirectly influence state decisions (Szazi, 2012). This highly developed in Kenya in the 80s when public space was opened to private actors allowing NGOs to engage in governance process (Hershey, 2013; Nyinguro and Otenyo, 2007). In addition, the decline of Kenyan government and retreat of public actors gave way for NGOs (Brass, 2012) making them a player in policy process.

NGOs have an important role in policy. NGOs that are well embedded within the society in which they are based, bring contextually relevant, locally sourced knowledge to the policy table, which is necessary in policy process, (Fitzduff and Church, 2004). This is because most NGOs operate from an international campaign, thus increasing the pool of policy ideas as the volume of the campaign moves to a local initiative designed to implement community-policing policy (Fitzduff and Church, 2004; Lekorwe and Mpabanga, 2007). For instance the selected NGOs have been involved in policy processes because they collaborate their projects with Kenyan government and they are widely accepted in the communities they serve.

There have been concerns that some NGOs succumb to government agendas and are said to be unaccountable to a wider public, but only to their members, supporters’ or/and donors. More so, some NGOs work in an unprofessional and disorganized manner making it problematic to engage NGOs in policy areas (Fitzduff and Church, 2004). However, the Kenyan government has acknowledged the NGO sector and does not influence NGOs activities and the government is also weak and relies heavily on NGO sector (Brass, 2012).
Therefore, NGOs have become the main actors in implementing international HIV/AIDS policy at national level (Seckinelgin, 2005) including in Kenya.

2.2.3 Case Study Method
Case study method is the most relevant for this thesis in analysing NGOs role in working with HIV/AIDS and checking the indicators of NGO success because NGOs are contextual unique (Harland, 2014), and this study concentrated on NGOs working on HIV/AIDS. The main objective is to show the indicators that determine success of an NGO and the impact of the success on the roles of NGO in policy process. The comparative nature of the cases studied will provide an intensive and in-depth result due to usage of a variety of sources (McGloin, 2008; Noor, 2008). These sources will be from NGOs reports, literature and evaluation reports from the donors.

As mentioned earlier, the role of NGOs has not been intensively covered by available literature (Barr et al, 2005). Therefore, using a real unit of analysis (three specific NGOs) will help to outline a clear view of how each organization has been involved in working with HIV/AIDS (Noor, 2008). This will entail an analysis of each organization’s HIV related programs in Kenya and a comparison of success indicators and their role on HIV policy.

For conceptual validation on indicators of NGO success, case study method will give a clear usage of the concepts and their relation to role on policy (George, 2005; Barr et al, 2005). Thus each organization’s case will be useful in this study to develop a clear conceptual insights into the operations of selected NGOs and their working environment. Resulting to a narrow range of analysis. The concepts of HIV/AIDS policy and NGO success will be clearly defined in reference to the selected cases. This will help the reader to get the clear meaning as intended by the researcher because definition of terms differs in different context.

On the other hand, case study will help to explore correlational mechanisms. In this case, the mechanisms are sufficient resources, embeddedness and established success. Thus, focusing on each case in detail will allow an in-depth exploration examining different variables exclusively disclosing these correlational aspects in each case studied. This will give a clear insight on the relationship between NGO success and role on policy.
Evaluating a number of actors improves the validity, accuracy and reliability of the research (Noor, 2008). Taking the specific NGOs and analysing them, a clear picture of the main argument develops. Therefore, the results will be well reflected in the analytical process. More so, a truth-value of this research is best founded in case studies (McGloin, 2008). This is on the claim that the role of NGOs on HIV policy is determined by their success. Thus the cases studied will increase the credibility of the results due to comparative analysis.

Focusing on the three cases will be advantageous in allowing generalization of narrower range. Although critics argue that case studies do not address generalization (Noor, 2008), conducting a multiple case study in this thesis will help to address the generalization due to the fact that the focus is just on one particular issue, which is HIV policy, in all the three organizations.

As for the possible limitations of case study methods, case selection bias, lack of representativeness and lack of case independence are considered to be major setback in a study (George, 2005). However, this thesis eliminates circumstances of biasness in a scenario where researchers are said to be bias due to deliberately choosing cases with a certain outcome. This is because the outcome here is already known (that NGOs have a role in policy process), and the main goal is to show which kind of NGOs play the role and whether their success can be determined by certain indicators.

On lack of case representative, this thesis does not aim to make a claim that the findings from a particular NGO study is applicable to all other NGOs on the role in HIV/AIDS policy in Kenya, but it does not exclude the possibility existence of other organizations with similar results. More so, the conceptual context of NGOs success does not require the cases to be independent, and the study evaluate similar factors in all the organizations and does not compare an organization’s operations in relation to the other, rather it compares their respective success indicators and roles on policy.

3. Background of NGOs and HIV/AIDS policy in Kenya
In this chapter, I will first give a short background on boom of NGO sector and their response to HIV/AIDS in Kenya, followed by a definition of an NGO and lastly present the development of HIV policy in Kenya.
3.1 NGOs boom and response to HIV/AIDS in Kenya

NGOs have existed in Kenya for many years. They began with faith-based NGOs network, thus linking private and public sector. This led to growth of civil society activities, which included giving services to the community (Hershey, 2013; Booth, 2004; Nyinguro and Otenyo, 2007). As NGOs continued to grow, the first cases of HIV were recorded in Kenya. Unlike Uganda that responded immediately to HIV/AIDS (Kinsman, 2010), Kenyan government denied the problem for a couple of years until after a report that the tourism industry, which was among the major economic drives of the country, has reported a decline on visits due to fears of blood safety in the country (Labov, 2002). Government non-response have been linked to the active role of NGOs in HIV/AIDS in Kenya (Lieberman, 2009; Booth, 2004; Barr et al, 2005; Hershey, 2011) thus, an explanation of NGOs intervention.

Booth argues that an abrupt end of the cold war led to Kenya losing its relevance for the United State and Western Europe, hence lack of foreign funding which Kenya had enjoyed for nearly thirty years. As a result, the government weakened drastically and the silence about HIV/AIDS continued (2004 p. 63). In early 1990’s the ruling regime faced a fierce coup which nearly succeeded, forcing the government to abandon everything else and solely concentrate on restoring political stability in the country.

As for Lieberman, institutionalization of ethnic divisions led to weak responses (2009, p. 368). Kenya has had tribal division even before HIV/AIDS epidemic. There was lack of unity to tackle HIV/AIDS as a national disaster as it would be with everything else since Kenya is divided along tribal lines (Ngunyi, 2013). In contrast, this argument may not hold much here since HIV/AIDS was not perceived to infect a certain ethnic or tribal group.

HIV itself has been seen as a driving force behind civil societies, while restricted press freedom and high income inequality has been affiliated to delayed government response (Hershey, 2011). The community needed an alternative to address HIV/AIDS fears. Therefore, NGOs got an overwhelming support from the communities because the government was not at reach for the people. The NGOs took over and addressed HIV issue and engaged in HIV projects (Hershey, 2013; KENWA, webpage).

Further, the scholars head to various directions giving reasons why the governments failed and reasons why NGOs responded. Although we have the reasons why the NGOs intervened,
how exactly is each NGO’s role evident in working with HIV/AIDS? Are the selected NGOs successful, and if so, does the success have any impact on their role on HIV policy? Answering these questions will contribute to achievement of the aim of this thesis, which is to show success of NGOs working with HIV/AIDS, outlining the success indicators and how the success impact on their roles in HIV/AIDS policy.

Without doubts, NGOs have achieved success (Hershey, 2011). To measure success, public health sector has focused on behaviour change while HIV-prevention programs focus on direct reach. However, this thesis will be directed to the indicators of NGO success as a whole because the success affects the role of NGOs and how they impact public policy. To begin with, HIV/AIDS epidemic made many organizations to formulate their activities either directly or indirectly. NGOs activities on HIV/AIDS have been argued to have negatively affected democracy and governance in Africa, women rights, African states autonomy and reversal of economic, and bureaucratic gains (Fredland 1998; Hershey, 2011). In the contrast, HIV epidemic created space for civil society. Different NGOs responded to the issue giving affected people some assurance since the government was quiet (Labov, 2002; Hershey, 2011).

3.2 Definition of an NGO

The term NGO is broad and ambiguous (Holmen and Jirström, 2009) it covers a wide range of organizations within civil society. These organizations are engaged in a range of activities from legal, human rights, democracy, environment, poverty, and domestic violence, HIV/AIDS to development (Labov, 2002).

Although the clear definition of NGO remains contested (Szazi, 2012), scholars are in consensus that NGO is not a state although they can produce a state (Bernal et al, 2014). In clarifying they are not the state they make the state visible. For example the government of Kenya has set out rules for NGOs such as registration with the NGO regulatory board (NGO Act, 1990). However, different institutions have a different definition of an NGO. For instance, United Nations states that “An NGO is a non-profit entity whose members are citizens or associations of citizens of one or more countries and whose activities are determined by the collective will of its members in response to the need of the members or of one or more communities or countries with which the NGO operates” (UN docs, 1994 Para 9). This definition has been dismissed with an argument that terrorists groups fit in it (Szazi, 2012).
However, the definition used in this thesis will be used will be as stated by Kenyan NGO Act 1990 as,

"An NGO means a private voluntary grouping of individuals or associations, not operated for profit or for other commercial purposes but which have organized themselves nationally or internationally for the promotion of social welfare, development, charity or research through mobilization of resources”

(NGO Co-ordination Act 1990, no. 19).

This definition will fit best for this thesis because the organizations selected define themselves as non-profit charity international organizations that are involved in promotion of social welfare, development and research through resource mobilization. This conforms to the above definition. In addition, they operate within Kenya and they are regulated under the Kenyan laws.

3.3 Development of HIV Policy in Kenya

After Kenyan government declared HIV/AIDS a national disaster in 1999, there was a need for a clear policy to guide various actors in dealing with the disease, and a comprehensive multi-sectoral strategy was put in place. The national strategy in implementing HIV policy has included various government ministries. The Ministry of Education introduced HIV education in the education curriculum, (CfBT, report) while the Ministry of health dealt with blood transfusion and testing. A National Aids Program (NAP) was established to oversee the development of more HIV/AIDS policies (Booth, 2004).

Today, there is a National Aids Control Council (NACC) that has a core mandate in developing strategies, policies and guidelines relevant to the prevention and control of HIV/AIDS in Kenya. NACC has led the national response to HIV/AIDS by coordinating and implementing two five-year and four-year strategic plans covering the periods of 2000-2010, and the third plan is in progress (NACC, publications).

The first Kenya National AIDS Strategic Plan 2000-2005 proposed the establishment of NACC and its decentralised structure. The second plan 2005-2013 was developed with exemplary participation from the government and other stakeholders in line with a “Three Ones” principles approach. This approach was to have One Coordination Agency, One Agreed Action Framework and One Agreed M&E system with NACC being the custodian. Despite having accomplished substantial gains in HIV/AIDS programming in Kenya, this
plan was cut short in 2010 due to emerging trends from research on new sources of HIV infections (NACC, webpage).

A third strategic plan 2010-2013 was developed and is currently being implemented. The plan’s vision is “A HIV-Free Society” and emphasizes on effective responding to evidence-based and providing coordinated, comprehensive high quality combination prevention, treatment and care services.

NACC and other stakeholders have developed other HIV strategies and HIV policies that include, the Youth Communication Strategy, Condom Policy and Strategy, Male Circumcision Policy, HIV/AIDS Policy at the work Place, HIV and AIDS Prevention and Control Act (NACC, publications). Among the stakeholders are NGOs who have played a role in the HIV policy process.

3.4 NGOs work in HIV/AIDS and human rights promotion in Kenya

Kenya has ratified various international instruments that seek to protect and promote right to health, and freedom from discrimination. This makes it easy for NGOs to work in health related programs without restrictions from the government. The selected NGOs work closely with WHO, UN and the government of Kenya, thus getting a platform to implement health provisions in accordance to international human rights instruments.

Although not legally binding, Kenya is a signatory of Universal Declaration on Human Rights 1948 (UDHR) whose main purpose is to give a common standard of achievement for all people in all nations. More so, the Kenyan Bill of Rights provided in the constitution is derived from the UDHR. In health, Article 25.1 of UDHR states that,

“Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control” (UN, webpage).

NGOs working with HIV/AIDS in Kenya have been operating in boundaries of the above definition.
In Kenya, rights of people directly or indirectly affected by HIV/AIDS continue to be violated. This includes discrimination and stigmatization in the society due to an individual’s HIV status. Further more, many Kenyans especially those who live in rural areas hardly enjoy the right to health (Booth, 2004). Therefore, the role of NGOs becomes more relevant and much needed.

The selected NGOs have adopted a right-based approach to health while implementing various programs. The rights-based approach has been based on three main aspects namely, active agency, indivisibility of civil, political and socio-economic rights, and the role to establish accountability for human rights protection and freedoms (London, 2008). These aspects helps governments, NGOs and other actors to incorporate human rights into HIV/AIDS related programs.

In active agency, NGOs have been representing the needs of the people to the government and policy makers (Freedman, 1995). This involves airing grievances of the communities in which the NGOs are embedded to. NGOs in Kenya are active agents between the government and the population.

NGOs work with HIV in Kenya extends to other sectors such as education, infrastructure, economy and environment reference. Thus, promoting indivisibility of civil, political and social-economic rights. NGOs work is diverse in nature; hence human rights tangle around each other thus becoming indivisible.

As NGO sector continue to boom, NGOs have taken up the role to establish accountability for human rights and freedoms. This has included accountability from the government, donors, NGOs and others who are active in both public and private sphere. This has made human rights a ground issue for actors’ cooperation (Gruskin et al, 2010).

Rights-based approach has promoted peoples right in Kenya. In particular, NGOs working in HIV sector has contributed greatly to right to health and freedom from discrimination.

4. Three NGOs in Kenya: Background, role in HIV policy and promotion of human rights

This chapter will present a background of the selected NGOs, the NGOs work within HIV in Kenya, the NGOs role in Kenyan HIV policy and lastly how the NGOs promote human rights in Kenya. The organizations are Family Health International (FHI 360), Programme for Appropriate Technology (PATH) and Elizabeth Glaser Pediatric AIDS Foundation (EGPAF).
4.1 Family Health International 360 (FHI 360)

FHI 360 is a non-profit human development organization founded in USA that focuses on improving peoples’ lives. They deal with a wide range of issues including, health, education, nutrition, environment, civil society, gender equality, research and technology. They operate in more than 70 countries partnering with governments, civil society organizations, the private sectors and the communities they serve. Many donors fund them but a large percentage is from USAID (FHI 360, about us).

Since mid-1980s, FHI 360 has been operating in Kenya. At the beginning, they focused on family planning programs and helped to shape the national HIV/AIDS response. Today, they are involved in various programs with a health focus. Their activities in HIV/AIDS are evidence of their goal of achieving an AIDS-free generation in Kenya. This goal is also among the set objectives of the Kenyan government vision 2030. In thesis, I will only highlight FHI 360 past and present programs within HIV/AIDS in order to be able to understand their role in HIV policy process and to assess whether success indicators are evident in the projects.

4.1.1 FHI 360 programs on HIV/AIDS in Kenya

As a HIV preventive measure, a Male Circumcision Consortium (MCC) was formed from 2007 to 2014. FHI 360 led the program to expand access to voluntary medical male circumcision (VMMC). Through this program importance of sufficient resources is clear because the program was funded through President’s Emergency Fund for AIDS Relief (PEPFAR) and Bill and Melinda Gates Foundation. Although the government of Kenya was an associate, FHI 360 was the program leader.

Geographically, the program’s activities were concentrated in western Kenya where the practice of male circumcision is uncommon, and it reached an estimated 800,000 men and boys in five years. More so, it provided the government of Kenya a guided knowledge on national initiative on male circumcision (FHI 360, webpage). Under MCC program, FHI 360 was involved in helping the government develop and implement a national male circumcision strategy (male circumcision organization).

In addition, FHI 360 identified and addressed misconceptions about male circumcision. In connecting research with practice, together with others, FHI 360 conducted a study titled, “Safety, Effective and Acceptability of the PrePex Device for Adult Male Circumcision in
Indicators of NGOs Success and Impacts, on NGOs Role in Policy Process in Kenya

Kenya” (FHI 360, webpage). With the study, the aim was to help the Kenyan government to identify whether Prepex is a safe, acceptable and feasible complement to the conventional surgical procedure in Kenya. Prepex is a small plastic device used for male circumcision that World Health Organisation (WHO) prequalified as usable internationally (WHO, 2013). The results of the study showed that the device was safe and feasible. The Kenyan government acknowledged plans to introduce the device and stated that the decision was influenced by the study (Male Circumcision Organization).

FHI 360 also got a platform through the media to inform the general public about male circumcision for HIV prevention (FHI 360, documents). The MCC program indicates that sufficient resources are important for an NGO success thus having an impact on their role. For instance FHI 360 got an informative role to the Kenyan government on the effects of Prepex that led to introduction of the device.

Another project that is currently operating is focused on nutrition and HIV. Among the people living with HIV, those with severe malnutrition are four times more likely to die of complications than those who do not have severe malnutrition (WHO, nutrition). In efforts to prevent malnutrition, FHI 360 runs a nutrition program called “Kenya Nutrition and HIV program (NHP)” that supports HIV/AIDS programs to ensure better outcomes for people through nutrition assistance. This program is implemented in collaboration with civil society organizations and faith-based organizations, nutritionists, counsellors and supports services in health facilities and in the community. Thus, FHI 360 enjoys a wide network thus leading to more recognition and trustworthiness. As for the resources, the program is USAID funded and it operates in more than 500 sites across the country. The main target groups are antiretroviral therapy (ART) clients, pre-ART clients, orphans and vulnerable children, and pregnant and postpartum women with HIV.

Further, working together with NACC and Ministry of Health, FHI 360 is involved in a project on “Roads to a Healthy Future (ROADS II)”. The purpose of this program is to increase efforts in reduction of HIV transmission among people whose work require high mobility. The implementers are working to develop a standardized, high quality; HIV prevention package that includes harmonized messages for mobile populations in Kenya for example truck drivers. The project also helps individuals and communities reduce their vulnerability to HIV by expanding their economic opportunities and improving food security.
This is done through provision of assistance in group savings and loan, livestock management, microenterprise development and urban and organic gardening. This leads to establishment of FHI 360 and connectedness within the community. In addition, they provide support and care for at-risk children, orphans and protects women and girls from sexual exploitation and abuse.

For mothers and children, who are also among the front campaigns for FHI 360, a program called, “APHIAplus Nuru ya Bonde” is in progress. Its aim is to improve the lives of mothers, children and their families. It focuses on delivery of quality health services related to HIV/AIDS. This program is implemented by a group of partners and FHI 360 has a lead role to oversee overall program management, and providing technical leadership. They strengthen HIV counseling and testing, prevent mother-to-child transmission (PMTCT), improve maternal and child health and provide HIV education and health services for sex workers.

Lastly, since women are at a higher risk of contracting HIV than men in Kenya (Avert, facts sheet), FHI 360 operates a program that target particularly women. The program is called, “Communicating about Microbicides with women in Mind”. With this project, FHI 360 aims to explore how a communication campaign might market a Microbicide gel that women at risk of acquiring HIV could use it in a variety of contexts, either in intimate relationships or in commercial sex work. This helps women to avoid association with infidelity that they encounter with other safety practices such as condom use. This program gets funds from USAID. With this outreach, FHI 360 has been involved in a substantial consultation with members of the potential audiences of a microbicide communication campaign. As a result, FHI 360 obtained data on the impact of message framing, which they could use to programs in Kenya and other countries. More so, through this program, FHI 360 recognition in Kenya as an effective and successful NGO continued to grow.

Throughout their work within HIV/AIDS in Kenya, FHI 360 has claimed success in having achieved substantial community and stakeholder engagement and collaboration with an in-country project advisory committee consisting of Kenyan policy makers, program implementers and civil society advocates (FHI 360, webpage). This claim is portrayed in the programs FHI 360 has been involved in and gives a substantial assertion that sufficient funds, networking and establishment are key factors in determining FHI 360 success.
4.1.2 FHI 360 role in HIV policy
In line with Kenya’s national strategic plan on journey towards an AIDS-free generation, FHI 360 has been using integrated approach in fighting HIV/AIDS by engaging directly with communities. This has promoted the male circumcision policy whose goal was to help reduce incidence of HIV infections in order to achieve an AIDS-free generation. The purpose was to provide a framework for safe, accessible and sustainable male circumcision services (NACC, publications). FHI 360 was actively involved in a leading position of implementing and overseeing the program on male circumcision. There are a number of other policies that FHI 360 has taken part through their programs for example the national guidelines on nutrition and HIV/AIDS and guidelines on use of ART for treating and preventing new infections.

4.1.3 FHI 360 promotion of right to health and Freedom from discrimination
FHI 360 has been actively involved in shaping national response to HIV/AIDS, with a target to achieve an aids free generation. This has resulted to involvement of the population and the government of Kenya in implementing policies that promote equality among the people, thus promoting freedom from discrimination.
On the other hand, right to health, FHI 360 has been providing a wide range of health services and possibility to targeted populations. These services include, providing education on nutrition and ART usage.

4.2 Programmes for Appropriate Technology (PATH)
PATH was founded in mid-1970s by family planning researchers who were interested in giving women ability to make their own choice about contraception. Their goal was to bond public health agencies and private industries to ensure that all over the world, people had access to condoms, birth control pills, intrauterine devices and other modern forms of pregnancy prevention.

PATH succeeded in their goals in contraceptive technology and expanded their work to health technologies. They put their efforts in developing a reputation for excellence in collaboration, for partnering with private sector, and for smart, effective solutions to global health problems. PATH works in over 70 countries, together with ministries of health, WHO, biotechnology industry and local organizations working to improve the health of the population in their communities (PATH, about us).
In Kenya, PATH has been working since 1978, helping Kenya’s health care sector improve services and strengthen community networks while empowering Kenyans to adopt healthy lifestyles and integrating HIV/AIDS and other health services (PATH, Webpage).

PATH offers Kenya technical expertise, management of comprehensive and collaborative projects and development of new approaches to address challenging health problems. In working with HIV, PATH has been part of the global effort to halt the spread of HIV by creating new forms of protection and improving on the existing ones. In addition, PATH engages in pilot projects that test innovative ideas for the first time. PATH has been working within a broad scope together with other organizations from empowering Kenyans for better health through strengthening community networks to helping health care sector in Kenya. However, this thesis will only focus on PATH involvement in the health integrated services in areas dealing with HIV/AIDS.

4.2.1 PATH Programs on HIV/AIDS in Kenya

The main objective of PATH in Kenya is to empower Kenyans for better health. Since Kenya has a high rate of HIV infection and its population is less than 25 years old (Avert, webpage), PATH has built up adolescent and reproductive health programs to address HIV/AIDS. This is in their attempt to decrease risky behavior and increase awareness of productive health and HIV/AIDS. PATH has also been promoting healthy youth lifestyles, offering merit badges for scouts and promoting healthy behaviors through community performances under their innovation toolbox called interactive theatre programs. For instance, they organized an interactive community theatre called “Magnet Theatre”, which the community get together and talk about how traditional attitudes may be increasing the HIV epidemic. This has helped to fuel an open debate on HIV and sex that is perceived to be a taboo. The discussion is held openly and on a regular basis laying the ground for societal attitudes to change for new social norms. As for the organizational success, the community engagement aspect increases validation of PATH within the community.

Similar to FHI 360, PATH launched a program called “Regional Outreach Addressing AIDS” to reach mobile population. PATH targets communications campaigns and educational programs. It addresses truck drivers and other mobile populations on making smart choices about sexual behavior in order to protect themselves and their family. This has increased PATH recognition in a wide geographical coverage.
In 2011, PATH launched a program called “AIDS, Population, and Health Integrated Assistance (APHIAplus)” that integrates health services to more than 10 million people. The services include integrating family planning, prevention of mother-to-child transmission (PMTCT), and pediatric and adult antiretroviral therapy with maternal and child health services. This program is implemented together with Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), other NGOs, and the Kenya Ministry of Health and the program is funded by USAID. With this collaboration, PATH can be said to be successful based on strong networks with others thus getting a role in HIV policy through working with policy institutions.

Another program targets the uniformed, non-military forces. The project is called the “AIDS Response in Forces in Uniform (Operation-ARIFU)”, which is funded by US Centers for Disease Control and Prevention. The goal is to increase access to HIV/AIDS and tuberculosis prevention, care and treatment services among personnel from Administration Police, National Youth Service, Kenya Wildlife Service, Kenya police and their families.

Having a technology focus, PATH offers technical and financial assistance in enabling each uniformed service to better manage and facilitate the delivery of high-quality HIV services. These services include, evidence-based HIV combination prevention approaches to promote healthy behaviors and strengthening the framework for tracking progress and demonstrating results.

To fasten the Kenyan government’s HIV prevention strategy, PATH is building and supporting a self-sustainable, independent entity known as the Partnership for an HIV-Free Generation Kenya (HFG/K). The goal is to aspire and provide opportunities for the youth to live healthy and productive lives and contribute to the realization of a HIV-free generation. The partnership is a public-private innovative aiming to reduce HIV incidence among youths in Kenya between the ages of 10-24 years by 50 % (Business Fight AIDS Organization).

Finally, PATH works closely with US Department of Health and Human Services and Centers for Disease Control and Prevention. PATH launched a nationwide program with services for prevention, care and treatment for tuberculosis, HIV and other sexually transmitted infections. HIV/AIDS has been a major focus of PATH since they have put efforts to integrate HIV to other health services, and they are said to be the largest health-integrating project in East
Africa. The integration project currently in Kenya has seen a dramatic increase in the number of people reached with the integrated services for HIV/AIDS among other health services. With programs on HIV issues, PATH can be said to be successful because of strong ties with other NGOs, the government of Kenya and the community. More so, getting funds from USAID proves that PATH is an already well-established organization.

4.2.2 PATH role on HIV policy

PATH has played a major role in HIV policy in Kenya with the help of the programs they operate. This has resulted to inclusion in Kenya National AIDS Strategic Plan (KNASP 2009-2014) that embraces a multi-sectoral approach to HIV programming and emphasizes the importance of accountability in every sector in the national response (NACC publications). On a policy on Kenya HIV Prevention Road Map, whose goal is to achieve a zero new HIV infections by 2030 (NACC, publications), PATH has launched several programs in efforts to reduce HIV infections among population in Kenya. Other policies that PATH has promoted through their programs are, mainstreaming gender in HIV responses, national guidelines for HIV testing and counseling, national communication strategy for the youth and quality policy.

4.2.3 PATH promotion of right to health and Freedom from discrimination

Through adolescence and reproductive health programs, PATH has made it possible for teenagers and youth to acquire health, which would otherwise not be readily available since the government of Kenya focuses primary on infrastructure and has hardly launched programs for the youth (Brass, 2012). With modern technology, PATH has collaborated with the government of Kenya to provide a right to health as provided in Article 12.1 of the International Covenant on Economic, Social, and Cultural Rights (ICESCR) 1966 that gives a comprehensive statement that everyone has a right to the enjoyment of the highest attainable standard of physical and mental health, while Article 12.2 outlines the steps that states party should take to achieve the full realization of a right to health (UN, webpage).

PATH creates awareness through the regional outreach program. This help in reducing stigmatization of HIV positive persons and enables people to integrate in the community regardless of a persons HIV status leading to elimination of discrimination.
4.3 Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)

EGPAF is a non-profit organization that was founded in 1988 by three mothers, with a goal to prevent pediatric HIV infection and eliminating pediatric AIDS through research, advocacy, and prevention, care and treatment programs. EGPAF works in 15 countries and is currently supporting more than 7,000 sites around the world. Today, EGPAF-supported programs have reached over 20 million women worldwide with services to prevent mother-to-child transmission of HIV. They have tested more than 17 million women for HIV, enrolled more than 175,000 children into HIV care and support programs and has started more than 104,000 children on antiretroviral treatment. EGPAF is currently the largest PMTC services provider under PEPFAR (EGPAF, webpage).

In Kenya, EGPAF began working in 2000 as a small, privately funded prevention of mother-to-child initiative. The initiative has grown to be one of the largest HIV treatment, care and prevention programs in Kenya. EGPAF has been collaborating with the Kenya Ministry of Public Health and Sanitation, Kenya Ministry of Medical Services, U.S. government partners such as USAID, multilateral organizations, and other partners to enhance access to PMTCT services and HIV care and treatment services. EGPAF works exclusively on HIV related issues and have been involved in many projects and programs. However, I will only outline some of their projects and programs.

4.3.1 EGPAF Programs on HIV/AIDS in Kenya

With funding from USAID, CDC and PEPFAR, an eight-year Call to Action (CTA) project was launched in Kenya. It was a service-based program that aimed at scaling up PMTCT services, and preventing pediatric HIV infection through research, advocacy, and treatment and prevention programs. The project concentrated on strengthening Kenya’s health system. It focused on building sustainability in supplies and stock of kits. It engaged district health management leadership in the planning, implementing and evaluation of PMTCT services through provision of capacity building support and technical assistance. Lastly, it improved service delivery by supporting partitioned sites in existing facilities and trucking containers to create additional counseling rooms.

As an established organization in Kenya, EGPAF has worked in line with the government of Kenya’s first strategic plan to decentralize health services. This is through EGPAF Pamoja Project that is funded by CDC and it operates in 11 districts in Nyanza province.
As a consortium member of the USAID-funded *AIDS, Population, and Health Integrated Assistance Plus (APHIAplus)* project together with PATH, EGPAF is supporting expanded access to integrated HIV/AIDS services in Western and Nyanza provinces in Kenya. In partnering with UNICEF and the government of Kenya, EGPAF provides technical assistance for PMTCT service delivery and improves and monitors evaluation of the PMTCT services. In addition, EGPAF provides therapeutic counseling that reduces stress of health workers providing PMTCT and HIV care and treatment services, supporting them to connect better with their patients.

EGPAF is also working together with PATH’s *ARIFU project*, to expand access to integrated TB and HIV/AIDS services for members of the non-military uniformed services and their families. EGPAF main role is to provide technical assistance, capacity building, and financial and logistical support.

Integrating family planning into HIV services through *Maisha project*. This project is supporting efforts to make reproductive health care services available as part of regular HIV care and treatment programs. This was established in 2012 in collaboration with Kenya National Aids and STI Control Program (NASCOP) in efforts to develop a tool to track progress towards elimination of mother to child transmission of HIV (EMTCT). With the help of this project, there was available data that helped health workers capture information and identify HIV-positive women attending antenatal clinics. This impacted on the role of EGPAF in national HIV policy development since the government relied on them to acquire data relevant for the national strategic plans.

EGPAF has incorporated HIV-services with their regular outpatient care programs with the aim of reducing stigma associated with being HIV-positive. This has helped more people to be willing to go for HIV care and treatment because regardless of individual HIV status, all services are within the same buildings and are offered by the same set of clinicians (EGPAF, report). In addition, EGPAF involves the community in stigma reduction, provides psychological support to people living with HIV and AIDS (PLWHA) and their family as well as strengthening linkages between facilities and community support groups. This has led to great success in promoting freedom from discrimination because of the community participation approach.
On networking, Tunaweza Project supports HIV/AIDS prevention, care and treatment activities of local organizations by providing organizational and systems strengthening through training and mentorship, expansion of technical capacity for evidence-based HIV/AIDS programming, and performance-based contracting to deliver multiple prevention, care and treatment services to targeted populations. Moreover, the project provides capacity building assistance to the Government of Kenya and HIV prevention partners at the national level on the design and implementation roll-out of Prevention with Positives (PwP) activities and evidence-informed bio-behavioral interventions for prevention of HIV.

Nakinae Akiyar project aims to reduce loss of follow-up in PMTCT for a mother/infant pair, and to increase uptake of early infant diagnosis by implementing appropriately designed, community-driven interventions that effectively engage PLHIV and existing community health structures. Since the project operates in a traditionally underserved area, the key elements of the program include promoting health seeking behaviors and continuous engagement with local communities.

4.3.2 EGPAF role on HIV policy
EGPAF is a leader in HIV operations research in Kenya and actively supports research projects in order to increase reach and effectiveness of PMTCT and HIV care and treatment programs in Kenya. EGPAF role in HIV policy in Kenya has been through their program model, which includes partnership with the government of Kenya, de-centralized community focus, training and technical assistance, capacity building for sustainability, program monitoring and evaluation and infrastructure and logistics development. For instance, on counseling and testing policy, EGPAF engage in counseling and testing. Other activities include Prevention with Positives and antiretroviral therapy. EGPAF has played a great part in policy and health system strengthening for example the organization helped Kenya government to implement a National PMTC program in 2002 (PEPFAR, government documents).

4.3.3 EGPAF promotion of right to health and Freedom from discrimination
With the largest HIV treatment, care and prevention program in Kenya, EGPAF has offered services to many Kenyans thus promoting human right to health. In addition, EGPAF programs covers a wide range of issues relating with HIV/AIDS, which promote health in one way or the other. EGPAF work supports Paul Hind’s report to the UN on right to health, that
everyone has a right to the enjoyment of the highest attainable standard of physical and mental health, and that the right to health is an inclusive right that extends beyond timely and appropriate health care, to safe water, adequate sanitation, healthy occupational and environmental conditions, and access to health-related education and information. He stated that everyone has a freedom to control own health (free from non-consensual medical treatment or experimentation) and a right to a health protection system that provides equal opportunity for people to enjoy the highest attainable standard of health (UN, webpage).

Together with other NGOs and the government of Kenya, EGPAF has put health as the ultimate goal in all their programs. More so, EGPAF has helped the community understand more about HIV/AIDS, thus promoting acceptance and gradually reducing stigma. This has led to promotion of equality and non-discrimination within the society.

5. Analysis
This chapter will have two main sections. In the first section, I will analyze how success of the three selected organizations has been affiliated to their role in policy process in order to assess the connection between NGO success and impact on policy. The second section will be a discussion of how NGOs role on policy process promote human rights. This will help to show the bond between the thesis and its relevance to human rights.

5.1 Connecting NGOs success and impact on policy process
The three selected organizations have been working in a similar way through their different projects, and they share a common goal to achieve an aids-free generation in Kenya. They target different groups in their activities, for instance PATH and FHI 360 targets adults and teenagers while EGPAF targets children and women because their main focus is on pediatric HIV and PMTCT. However focusing on the three determinant of NGO success, describes how the NGOs success is related to their role on policy process. This will be illustrated in sub-sections examining how different factors namely: resources, embeddedness and established success that are indicators of NGO success are evident in each of the selected NGOs and how they are connected to their role on HIV policy. To show this, I will make a comparison between the NGOs activities and the development of Kenya’s HIV policy in order to give the reader a clear picture of how successful NGOs have a role in policy process.
5.1.1 How resources contribute to NGO success

The three organizations presented have been receiving donations from various sources and are managed by highly skilled directors. Since finances and manpower are important for NGOs operations, donors have a great influence on NGOs. They influence the activities and the ability of NGOs to perform. Although different donors have different impacts on NGOs work, donors have immensely shaped the three selected organizations. This has included programs to train employees for technical and service provision as well as support professionalism by demanding clarity and transparency on NGOs activities. In particular PATH has been actively involved in provision of technical assistance in the Kenya health care sector and their employees attend the training programs in order to facilitate high quality service (PATH, webpage).

In most cases, NGOs perform charitable works thus depending heavily on donations to carry out their operations, which can be limited due to lack of resources (Sundstrom, 2006). PATH, EGPAF and FHI 360 have adequate and sufficient finances. This is through funds from various sources such as foundations, US government and other non-profit organizations. PATH operates with sufficient and stable diverse funding sources in which 47.6% of the total donations come from foundations, 33.2% from US government and the rest comes from other governments, other nonprofit organizations, individuals and interest from investments (PATH, finances). This has helped PATH to implement their programs effectively. Through the program “AIDS, Population and Health Integrated Assistance (APHIplus)” that is funded by USAID and EGPAF is a consortium member, PATH has gained recognition from Kenyan government that has led to collaboration with the Kenya Ministry of Health. This recognition has contributed to PATH being involved directly and directly in the HIV policy in accordance to the national aids strategic plans and vision 2030 of achieving an aids-free generation.

Similarly, EGPAF also receives funding from diverse sources and this helps them to concentrate on their projects. With major operations in research, EGPAF has been privileged to work with the Kenya Medical Research Institute (KEMRI). Policy maker consult KEMRI prior to implementation of certain health policies including HIV policy on ART. This has applied to FHI 360 as well through their program on male circumcision, which enabled them to conduct a survey that was used by the Kenyan government in considering using the Prepex device.
Donors play an important role in uniting NGOs and the government. This can be achieved when NGOs request for policies that promote their activities such as exemption of taxation since NGOs help the government. USAID is among the donors who fund these organizations and since USAID funds only stable organizations with clear goals, these organizations enjoy financial stability (Hearn, 1998).

5.1.2 Embeddedness with other actors and NGO success

The three NGOs have actively used community participation approach and built relations with other organizations as well as Kenyan government ministries. They work together in implementing various programs such as the ROADS II program targeting mobile populations, ARIFU program that targets the non-military uniformed officers and APHIAplus that targets mothers and children. Strong ties lay a foundation for any inclusion in a policy process (Fitzduff and Church, 2004) so, building a bond with policy makers is a breakthrough for an NGO. The selected NGOs have been incorporating their programs to Kenyan national strategic plan, with the aim of reducing HIV transmission. This asserts that building a relationship with the institutions an NGO intends to influence is essential for a success in policy process.

When an NGO is set to work on set goals, cooperation with relevant parties becomes an important aspect in an attempt to secure access to the political environment, community and other organizations. This does not mean that the actors involved in relation building must share similar objectives because different parties have different roles in policy process. In addition, developing and maintaining strong and productive connections with policy-makers is important to the inclusion of an NGO in the policy process (Fitzduff and Church, 2004).

EGPAF implements programs together with other organizations such as PATH, UNICEF and the government of Kenya. Collaboration promotes strong connectedness with other actors in the country. Local political environment influences development of NGOs, thus working together with government institutions have helped the NGOs to have a platform during the policy process.
5.1.3 Establishment as part of NGO success

Established success is demonstrated by ability of an NGO to implement projects successfully and maintaining a smooth interaction with other actors involved in the community in which they operate. The three NGOs have been existence for several years in Kenya and their work continues to expand. They work together with each other, the community and the government of Kenya. They have also completed several projects successfully and respective donors have accredited for their work. This means they already have an established success.

As evident with the organizations diverse focus, involvement in a number of several main program areas contributes to an NGO establishment in the community. FHI 360 covers a wide range from family planning programs to HIV/AIDS integration to other health services while PATH engages in a provision of a vast of different services. Likewise, EGPAF has several areas of focus dealing with provision of technical assistance, capacity building and financial and logistical support. In addition, the three NGOs have a wide geographical reach with programs in various regions in the country. The MCC program in which FHI 360 was the program leader operated in the west region while other programs are in capital (Nairobi) and coast region. With the program targeting mobile populations, the organizations have included road shows as part of their implementation strategies thus participating in many regions. This makes them trustworthy since a wide population is familiar with their operations.

Former and current employees strengthen further the credibility of an NGO. They give the NGO a strong voice and recognition (Barr et al, 2005). This is because they are well connected both locally and internationally.

5.2 Does NGOs role on policy process promote human rights?

Since NGOs working with HIV in Kenya has played a role in development of HIV policy, particularly offering HIV related services such as testing, counseling and ART, how is this connected to individual human rights? The population these organizations serve has enjoyed various rights such as freedom from discrimination and right to health. These rights have been recognized in international through the United Nations in which Kenya is a member state (UN, member states).

Focusing on freedom from discrimination, NGOs have been involved in development of the Kenyan HIV/AIDS policy at the work place, which assures equal treatment for each employee regardless of their HIV status (Ministry of Labor and Human Resource Development) The
three NGOs have a promoted freedom from discrimination through fighting stigma, promoting acceptance in the society through educational programs and encouraging the infected persons to seek treatment and to protect their families.

Right to health is provided in UN human rights treaties such as ICESCR 1966, CEDAW 1979, CRC 1989 as well as WHO constitution that state the highest attainable standard of health is a fundamental right for everyone (WHO, webpage). The organizations has helped Kenyans to realize and enjoy the right to health through being part in formulation of health policies and implementation of health programs thus helping Kenyan government to provide conditions in which everyone can acquire health services especially HIV related medication.

To sum up, the three determinants of NGO success are evident in all the three organizations analyzed. They have sufficient and adequate resources, they are well connected with the community, other organizations and governmental institutions, and they are already well established in Kenya. Therefore, we can tell the organizations are successful and as a result, they are involved in policy process. In HIV policy, Kenya has engaged these organizations. So, their success has contributed to the role they play in policy process.

6. Conclusion

This chapter is divided in three parts. Starting with a summary that will give a recap on the main ideas and argument of the thesis. Following a conclusion that will give the findings of the thesis based on the analysed materials and finally a call for further research within the research area of this thesis.

6.1 Summary

This thesis has shown that in general, successful NGOs have a role in policy process and that NGO success has an impact on NGOs role. This was done through an analysis of the three indicators of NGO success; sufficient resources, embeddedness and established success, which are present in all the three organizations studied. Other determinants of NGO success are not comprehensive because they are not related to each other and it is difficult to do a comparative study on organizations that do not share similar factors.

The three selected organizations share common goals with the government of Kenya in accordance to HIV/AIDS strategic plans (NACC, stakeholders), work within same programs
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agenda, have common donors and have strong ties with each other. This validates the findings of this thesis that the three indicators are related and influence each other.

The role of the organizations is clearly presented in the development of HIV policy in Kenya since the organizations has been collaborating with institutions responsible for development and implementation of the policy. Government ministries and policy institutions has been in dialogue with the organizations and have acknowledged their presence through accreditation of the NGOs work and opening up public space for the NGOs.

6.2 Discussion

NGO success needs to be viewed as an important aspect of an NGO role in policy process. To determine NGO success, an organization has to achieve all the three factors namely, resources, embeddedness and establishment. Specifically on resources, an NGO should have sufficient and reliable source of finances as well as highly trained and motivated workers. On networking, strong relationships are essential for an NGO in a community and this validates the capability of NGO outreach. On establishment, the latter is a foundation. Once an NGO has built relationships, and has secured funds, a successful establishment is guaranteed.

As in the Kenyan HIV policy case, we can claim that successful NGOs have a role in policy process. The government of Kenya has included NGOs in implementing and monitoring the HIV policy. The NGOs selected can be classified as successful in line with indicators of NGO success. They have successfully over several years established in Kenya, have sufficient funds and have built lasting relationships with the political environment. This increases their chances to play a role in policies that are developed in long-term processes.

In assessing NGOs success two aspects can be said to be most important; partnerships and funding. Partnerships bring up strength that is needed to implement programs and to air a voice of the people. Working together with other NGOs, governments and communities have led to established success. Therefore, it is appropriate to advocate for partnership as a relevant aspect of NGOs success that oversee the inclusion of NGOs in policy process. In addition, stable and reliable funding leads to success of projects and programs that NGOs run. PATH, FHI 360 and EGPAF are all funded by established donors and has proven success in their respective projects.
6.3 Further Research

Despite having various studies on NGOs, many scholars have discussed NGO sector as a whole or in wide range such as NGO development, transition, funding and governance. Thus narrowing the availability of research on NGOs role and success. Although this thesis arrived to a certain conclusion that successful NGOs have a role in policy process, it was quite difficult to get reasonable materials to study particularly on factors that determine NGO success in developing countries. There was a scarcity of both fieldwork and desktop materials available. Therefore, a need for a broader range of studies is needed in order to give a further validation of the conclusion because this research was conducted with a limited selection.
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