

DEVELOPING CONNECTIONS BETWEEN EUROPEAN AND U.S. FUNDERS

THE EUROPEAN HIV/AIDS FUNDERS GROUP (EFG) AND FUNDERS CONCERNED ABOUT AIDS (FCAA)

Building Global Partners, Vienna



Bill Gates

Together, the European HIV/AIDS Funders Group (EFG) and Funders Concerned About AIDS (FCAA) have been tracking the field of HIV/AIDS philanthropy for close to a decade, with a collaborative goal of creating the most comprehensive portrait

possible of global HIV/AIDS-related institutional philanthropy in an effort to facilitate greater coordination and transparency among funders and encourage expanded philanthropic support for HIV/AIDS work.

While our combined networks disbursed approximately \$738 million dollars in HIV/AIDS-related philanthropy, EFG and FCAA understand the critical need to explore and identify shared funding synergies and resulting gaps among funders from across Europe and the United States. As an initial step in creating dialogue among our networks, EFG and FCAA convened its first-ever joint reception in July 2010 at the XVIII International AIDS Conference in Vienna to increase networking, find commonalities and explore ways of working together to address HIV/AIDS more effectively.

More than 200 representatives from 75 private, public and multilateral funding organisations attended the “Convening and Connecting HIV/AIDS Philanthropy: Building Global Partners” reception for an evening of networking and inspirational keynote addresses from Bill Gates, Co-Chair and Trustee, The Bill & Melinda Gates Foundation, and Annie Lennox, Founder, Sing.

After a full hour of cocktails and canapés, funders focused on networking with colleagues from

across Europe and the United States. Postcards disbursed throughout the reception acted as conversation starters by depicting images and stories of innovation in AIDS funding, including: the Ford Foundation’s new initiative to address the domestic U.S. HIV/AIDS epidemic; supporting prevention of vertical transmission initiatives (The Elton John AIDS Foundation, Johnson & Johnson, M•A•C AIDS Fund); The Diana, Princess of Wales Memorial Fund’s Palliative Care Initiative; The Greater Than AIDS initiative, a project by the Kaiser Family Foundation and the Black AIDS Institute supported by the Ford Foundation, M•A•C AIDS Fund and the Elton John AIDS Foundation; funding domestic (AIDS Foundation of Chicago) and international (The Bill & Melinda Gates Foundation) syringe exchange programs; the power of funders to convene (Flowers Heritage Foundation); supporting community partners (Levi Strauss Foundation) and youth prevention & awareness programs (the MTV Staying Alive Foundation); and improving the quality of life for people living with HIV/AIDS in Africa (Comic Relief).

FCAA and EFG are pleased that this inaugural effort to create a network of EU and US funders was so well received and believe that this reflects a genuine interest on the part of funders to network beyond borders. Our organisations plan to build on the momentum of this initial event to strengthen the global field of HIV/AIDS philanthropy.



Annie Lennox

EXAMPLES OF INNOVATIVE FUNDING HEALTH SYSTEMS STRENGTHENING

FONDATION MÉRIEUX RESAOLAB (Burkina Faso, Mali and Senegal)

In Africa, inadequate or non-existent biomedical diagnostic testing, especially with regard to infectious diseases, has taken a heavy toll. In Burkina Faso, Mali and Senegal, the three countries where this project is carried out, it is estimated that more than 80% of the 300,000 people now living with HIV are unaware of their condition. Moreover, although tuberculosis (TB) affects 100,000 individuals annually, approximately one third do not have access to accurate diagnostic tests. In order to improve the fight against infectious diseases like HIV and TB and the access to appropriate treatment, there is an urgent need for strengthening the whole laboratory system. Fondation Mérieux's project, RESAOLAB (Réseau Afrique de l'Ouest de Laboratoires—West African Laboratory Network), was created in response to requests from the Ministries of Health of the three countries to build a network of biomedical laboratories.

This three-year project has a budget of 4 million euros (US\$5.1 million), 3 million of which have been provided by Agence Française de Développement (AFD, the French government's development agency), with the remaining 1 million euros coming from the project leader, Fondation Mérieux. The project is based on the three fundamental aspects that constitute an effective network of laboratories: professional training of staff, quality management, and epidemiological surveillance. The Ministries of Health and their respective Laboratory/Drug Departments are closely associated with this project, and WHO and the West African Health Organization are members of the project's steering committee.

The main activities of the RESAOLAB project, which was launched in 2009, are to standardise and decentralise professional training for laboratory staff; reinforce quality assurance with defined standards; and provide support to the surveillance system in conjunction with WHO. Investment in the renewal of national and regional laboratories is necessary to support standardized facilities used for educational and quality control purposes. Competencies will be shared among each of the three countries, and a sub-regional network of laboratories will be set up to launch harmonised practices among the countries involved. The project is expected to be ultimately expanded to other West African countries and is open for partnerships in this regard.



Staff member at RESAOLAB

EXAMPLES OF INNOVATIVE FUNDING SUPPORTING MARGINALISED POPULATIONS

AIDS FONDS

Global Forum on MSM & HIV and the MSM Initiative

One of Aids Fonds' key funding areas centres on prevention, treatment, care, and advocacy for populations that are greatly affected by HIV/AIDS but receive the least support, such as men who have sex with men (MSM). Aids Fonds has been a long-time funder of the Global Forum on MSM & HIV (MSMGF), an organisation that advocates for equal access to HIV services for MSM, and promotes the health and rights of MSM worldwide.

Recent advocacy activities by MSMGF include a letter campaign denouncing the anti-homosexuality bill in Uganda, sent to President Museveni and the U.S. Ambassador to Uganda; a collaboration with WHO to develop guidelines for the prevention and treatment of HIV and other sexually transmitted infections among MSM and transgender people in low- and middle-income countries; and engaging with officials at U.S. government-funded global programmes (PEPFAR and the Global Health Initiative) via an MSM Policy Working Group to ensure those programmes support MSM.

In addition, MSMGF gathers and presents news, reports, and other information relating to MSM in the form of newsletters and digests (its Eblast, for example, shares innovative projects and funding opportunities); provides discussion forums in seven languages; hosts a biennial pre-conference on MSM-related issues before each International AIDS Conference; conducts survey research on HIV prevention strategies among MSM and MSM service providers; and provides technical assistance and capacity building services for MSM and advocates worldwide.

Aids Fonds also supports the MSM Initiative, established in 2007 by amFAR (American Foundation for AIDS Research) to reduce rates of HIV infection and transmission among MSM in resource-limited countries. The MSM Initiative supports and empowers grassroots MSM organisations, builds knowledge and awareness of HIV epidemics among MSM, and advocates for effective policies and increased funding. The two major components of the initiative are the Community Awards Program, which provides small, targeted awards to grassroots groups in resource-limited countries to provide prevention, treatment, care, and support services to MSM; and the Advocacy Program, which promotes and supports global advocacy efforts aimed at increasing funding for HIV prevention, treatment, and support services for MSM, and advances policy efforts aimed at ending the stigma, discrimination, and violence that threaten the lives of MSM and fuel the spread of HIV.



**Africa Peer Review Meeting in Johannesburg,
South Africa for the MSM Initiative**

EXAMPLES OF INNOVATIVE FUNDING

BUILDING CAPACITY OF LOCAL HEALTH ORGANISATIONS

SIDACTION

Centre-SAS (Côte d'Ivoire)

Sidaction has provided technical and financial assistance to the Centre Solidarité Action Sociale de Bouaké (Centre-SAS) in Côte d'Ivoire since 1997. In the past, support for the pharmacy, laboratory equipment management, and financial management was provided. Currently, technical assistance is provided regularly on paediatric care. Access to specialised training is offered for staff members, including mentoring of medical doctors and other medical care providers. Such support has enabled Centre-SAS to grow from a small support organisation to a large provider of a full range of HIV/AIDS services.

Presently, Centre-SAS provides treatment, care and follow-up to over 3,500 people, including more than 1,500 adults and nearly 200 children on antiretroviral treatment. Centre-SAS is the top provider of antiretroviral treatment and care in the city of Bouaké and its "family-centred care" is a model throughout the region. In addition, the organisation offers psycho-social support and education subsidies to children infected and affected by HIV, and works with partners to deliver home-based care.

In 2010, Sidaction is providing support for Centre-SAS for salaries for staff including medical doctors, nurses, lab staff, administrative and finance employees, and social dept staff; buildings and facilities; securing a budget for Centre-SAS so they can order exactly what they need through the centralised state pharmacy; laboratory equipment and supplies; and training. Recently, all staff working with children exposed to and infected by HIV were trained, including medical doctors, medical assistants, social workers, and some community workers.



Lab facility in Centre-SAS

EXAMPLES OF INNOVATIVE FUNDING

SHARING BEST PRACTICES

EGMONT TRUST

Project-to-project information exchange (Zambia and Zimbabwe)

One of the key problems with “traditional” monitoring and evaluation requirements is that they are essentially extractive: pulling out information for an external purpose (often for donors), with no resulting learning or programme improvement for the local organisations or their beneficiaries.

In the autumn of 2009, the Egmont Trust invited selected partners in Zambia and Zimbabwe to take part in an experimental project-to-project evaluation exercise, in which pairs of organisations assessed each other and wrote up their findings. Initial results have demonstrated how, with little or no added cost to their organisations, partners can join forces to share the best and most effective ways of achieving results. For example, Egmont partner HOSPAZ (Hospice Association of Zimbabwe) is the sector leader in provision of home-based and palliative care to both adults and children. Through peer assessment and constructive advice, HOSPAZ is now helping to raise the standard of care provided by Batsirai Group in the Zimbabwean town of Chinhoyi—a vital contribution in a country so heavily affected by HIV/AIDS. In turn, Batsirai’s successful microcredit work is now being adapted by HOSPAZ for its own clients, contributing to their economic as well as physical rehabilitation.

A number of Egmont Trust’s partners are now focusing on improving immunity and health through better nutrition. By linking together for mutual assessment and support, organisations such as AIDS Caring Trust in Harare and Sikhethimpilo Centre near Bulawayo (both in Zimbabwe) have shared knowledge about what nutritious crops are easiest and cheapest to grow, and what food production and preparation methods are most acceptable to local people.

In all of the pilot pairings so far, there have been insights and usable observations that had the credibility of coming from others engaged in similar activities in a similar context. This has led to increased learning by both parties—assessors as well as those being assessed. The power of this horizontal learning amongst peers is that it is more constructive and more valuable in practice than externally imposed processes. Furthermore, because it is internally driven and produces material of intrinsic value to the organisations and their beneficiaries, it stands a far greater chance of being sustained and thus continuing to raise quality and effectiveness over the long-term.



Better nutrition for children is one result of Egmont partners sharing knowledge about food production and preparation.

EXAMPLES OF INNOVATIVE FUNDING INTEGRATING PROGRAMMES

AVERT

Mpfuxeledo Project (South Africa)

This project works with the staff and patients of Tintswalo Hospital, a 450-bed facility in rural Mpumalanga province, South Africa. Before the Mpfuxeledo Project began, all HIV/AIDS services in the area were referred to and managed at a separate clinic run by the University of Witwatersrand's Rural AIDS and Development Action Research Program (RADAR). RADAR, at the time the only HIV/AIDS service provider in the area, operated a small antiretroviral clinic which had a very limited capacity to deal with the overwhelming number of patients, being understaffed and under-resourced.

The Tintswalo Hospital's wards were overflowing with patients not responding to routine medical care, because most patients were HIV-positive and in need of antiretroviral treatment. The hospital was facing several issues that made it difficult to provide HIV/AIDS care, including renovation work in the hospital, shortage of equipment, lack of cooperation by hospital staff, and lack of hospital capacity to make decisions on the ground. This led to RADAR establishing Mpfuxeledo, funded by the UK-based charity AVERT.

Launched in October 2008, the project aims to improve the state of HIV/AIDS services within Tintswalo Hospital and the surrounding area through patient empowerment, advocacy and service linkages. Several distinct areas of work all contribute towards this aim. Peer educators speak to patients waiting for appointments at the hospital, raising awareness about HIV and access to HIV-specific services. The educators have gained a good reputation locally, and have been invited to speak at teachers' meetings and school events. Counsellors provide voluntary testing and counselling (VCT) services within the hospital

premises, allowing quick referral to the relevant departments for care and treatment. In addition, they offer adherence counselling to those at risk of treatment failure.

Mpfuxeledo also seeks to strengthen the hospital's HIV/AIDS care system. It promotes linkages between the hospital's care section and other community care programmes and seeks to improve continuity of care by improving referral channels within the hospital. Focus areas within the hospital are those with potential high impact such as in-patient wards, maternity units and the out-patient department.

Within one year of beginning the project, Mpfuxeledo provided education to over 30,000 people visiting Tintswalo Hospital and identified 436 clients infected with HIV. The RADAR clinic still provides HIV/AIDS services to the area, but the hospital's increased HIV/AIDS service capacity has removed a lot of the pressure it was experiencing. Mpfuxeledo succeeds because it builds upon the existing resources within the hospital and surrounding community in a sustainable way. By working to improve knowledge of and access to HIV/AIDS services among both patients and health care workers, Tintswalo Hospital is slowly shifting toward greater awareness and improved clinical outcomes.



Two peer educators working in the out-patient department at Tintswalo hospital

EXAMPLES OF INNOVATIVE FUNDING HUMAN RIGHTS APPROACH

FONDATION DE FRANCE REDS- Réseau sur l'éthique le droit et le sida/The Network on Ethics, Law and AIDS (Cameroon)

In some contexts, longstanding traditions and beliefs lead to a lack of social and economic autonomy for women, and result in rendering women more vulnerable to HIV/AIDS. Women currently represent nearly 60% of people living with HIV/AIDS in Sub-Saharan Africa. The Network on Ethics, Law and AIDS (REDS) in Yaoundé, Cameroon is convinced that the fight against the disease requires a raised awareness and a better acknowledgment of women's rights within Cameroon society.

The project takes place in Bamiléké country in West Cameroon, where certain customs are particularly harmful to women, and cause an increase in HIV/AIDS incidence. Jean-Marie Talom, president of REDS, emphasises that "Behaviour change is only possible through a social consensus, by relying on the key actors of the society: the traditional chiefs and notables, the register officers, the association leaders, and the health organisations." Thus the project works on two levels. In the short term, it consists of raising awareness about the risks of HIV/AIDS, and in providing advice on practical prevention. In the longer term, the project addresses changes in mentality, by encouraging women to make themselves heard within their families, and by public authorities, via the formation of organised advocacy groups.

As a result of the project, sixty women have been financially supported for medical consultations, examinations and drugs. In addition, three awareness-raising workshops were organised, bringing together twenty-five community leaders, thirty women's association leaders, and twenty-five HIV/AIDS or women's reproductive health associations, to create spaces for dialogue, to bring attention to the feminisation of the HIV/AIDS epidemic, and to discuss together the condition of women in their society. Finally, a handbook on prevention has been written together by the traditional chiefs and the women about harmful traditional practices and women's rights regarding health and reproduction, and has been disseminated to local communities.



Women waiting for medical consultation

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EXAMPLES OF INNOVATIVE FUNDING

UNDERSTANDING A CHANGING EPIDEMIC

KING BAUDOIN FOUNDATION

Qualitative behavioural research on sexuality and HIV/AIDS in the Democratic Republic of Congo (DRC)

In 2010, a personal and anonymous survey will be conducted across various provinces and ethnic groups in DRC to examine sexual behaviour and health. This will complement and enrich existing studies aimed at providing more accurate insights (e.g., the 2005 surveillance study of behaviour and HIV surveillance conducted by the Kinshasa School of Public Health).

During the last 20 years, sexual behaviour has changed significantly in DRC. Population movement, improved access to global and regional media, and the opening up of Congolese society to the greater world have revolutionised sexual habits. Whether as a consequence of these changes or its own source of social upheaval, sexual violence against women has increased. Although comprehensive statistics on sexual violence remain difficult to compile, it is clear that cases have surged both numerically and in terms of the ferocity of aggression.

The ongoing civil strife is often put forward as an explanation for these developments. However, the few reliable statistics that exist show that towns that have had neither combat, nor displaced persons, nor any particular activity of uniformed men, nevertheless have extremely high levels of sexual violence perpetrated by civilians. Factors other than war must therefore be relevant and important to understand. Qualitative behavioural research studies can shed light on such factors by analysing how people perceive and live out their sexuality.

Such studies are particularly crucial because the corollary of such violence is, of course, the spread of HIV. The fight against HIV/AIDS in DRC can only be strengthened and made more effective when the roots of problematic behaviour such as sexual violence are understood and addressed.

The aim of this project is to report data on people's intimacy, and set up organisations that provide HIV/AIDS services as well as training on reducing sexual violence and aggression. Involved local actors will integrate the results of this project, which has critical human rights implications, in their multi-media communication programmes, including community radio programmes.



Understanding sexual behaviour is crucial for developing responses to HIV/AIDS.