



Investing in our future

The Global Fund

To Fight AIDS, Tuberculosis and Malaria

Involving Community: Why and How?

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18-20 February 2009



Outline

- Why involve community?
- How do we involve NGOs and CBOs?
- Why is capacity building needed?
- How do we build capacity?

Why involve community?

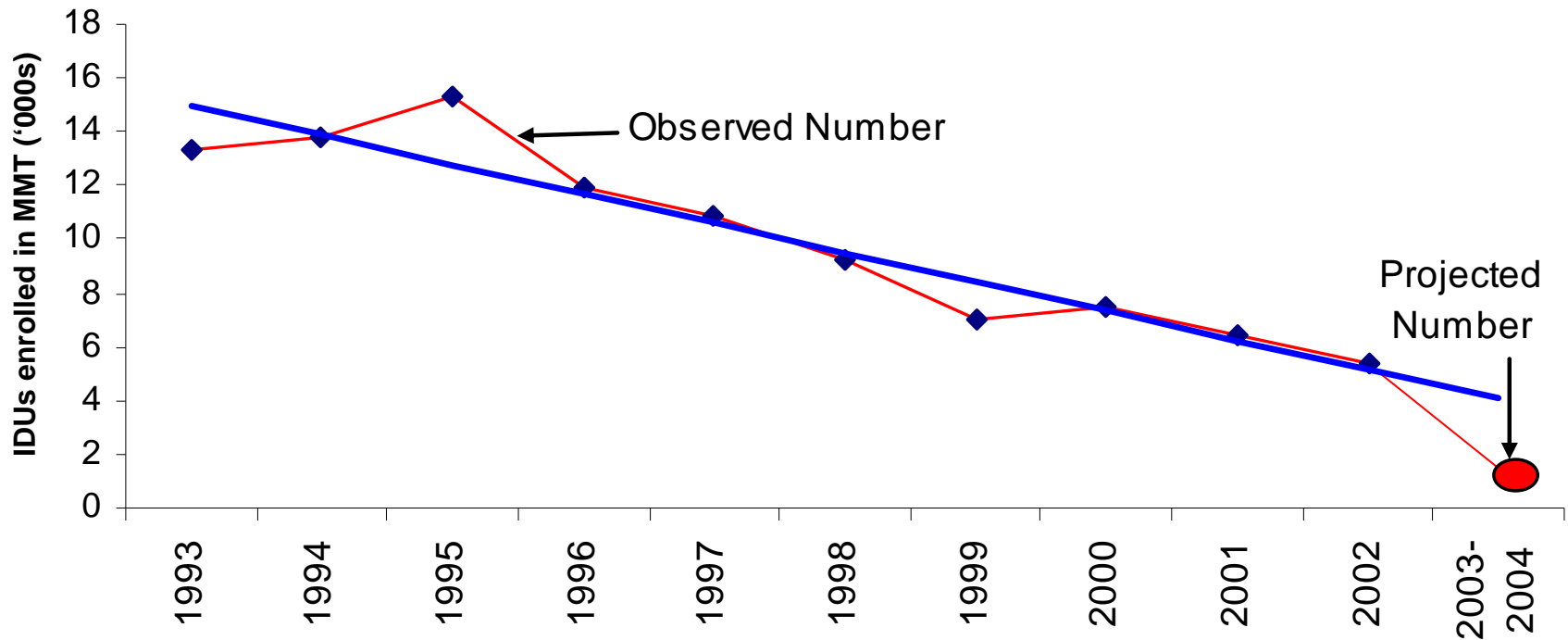


mobile clinic labeled “AIDS Control Society” because it would indicate to male clients that they had HIV

Why involve community?



Number of MMT in BMA area (1992-2004)



Source: Unpublished Data, Sarkar S, UNAIDS SEAPICT

Involving community at all stages

- Community groups should be involved from planning to implementation:
 - Policy: to provide perspective on how laws and policies may impact implementation and access to services (e.g., Cambodia Trafficking law)
 - Planning: to ensure that focus is in the right geographic location and among the right sub-population (e.g., high-risk v low-risk MSM)
 - Implementation: to maximize access to services (e.g., understanding that PLWHA may need transport to clinics for ARV distribution and CD4 testing)
 - Monitoring and Evaluation: MARPs are likely to be more honest about behavior and open to testing with someone from their own community (feeling of rapport/trust)



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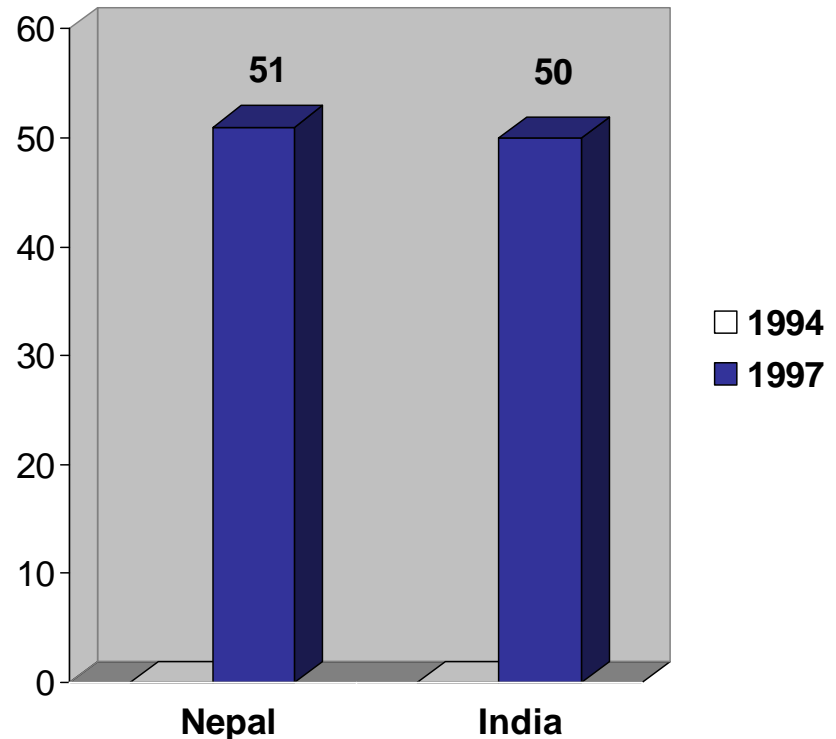
Why do we need to build capacity

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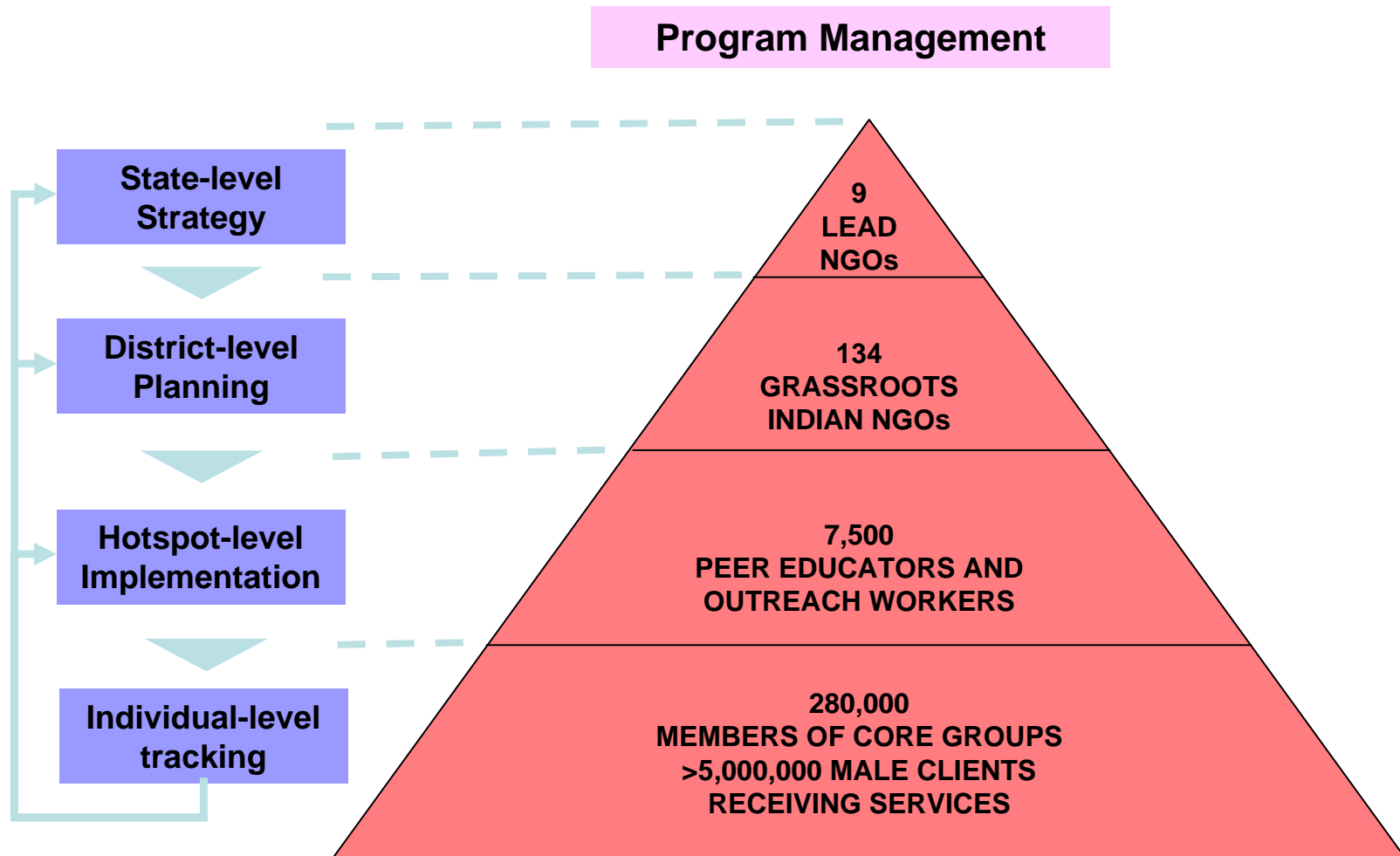


Why do we need to build capacity?

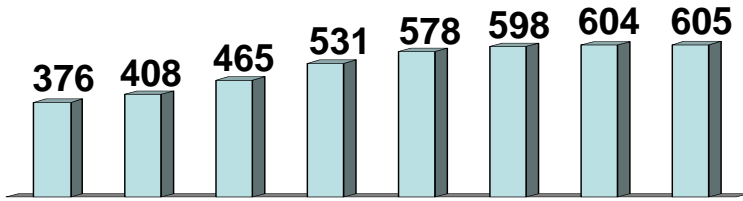
- Interventions do not meet the necessary elements and quality standards
- Success at the small scale has not translated into delivery at a scale that reverses the epidemic



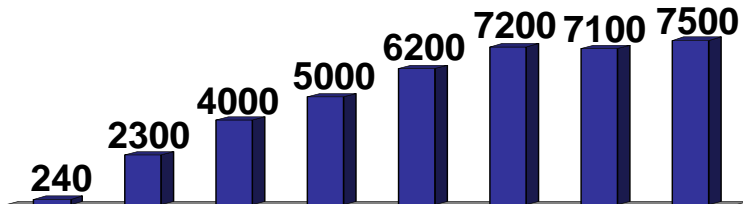
Example of Scale ...



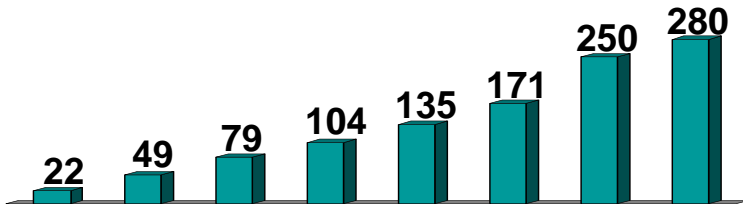
Rapid Roll-out of Footprint and Services



Towns covered

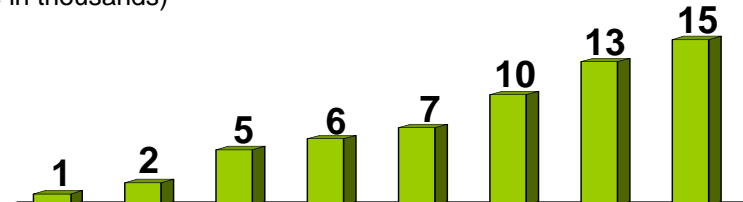


Peer educators



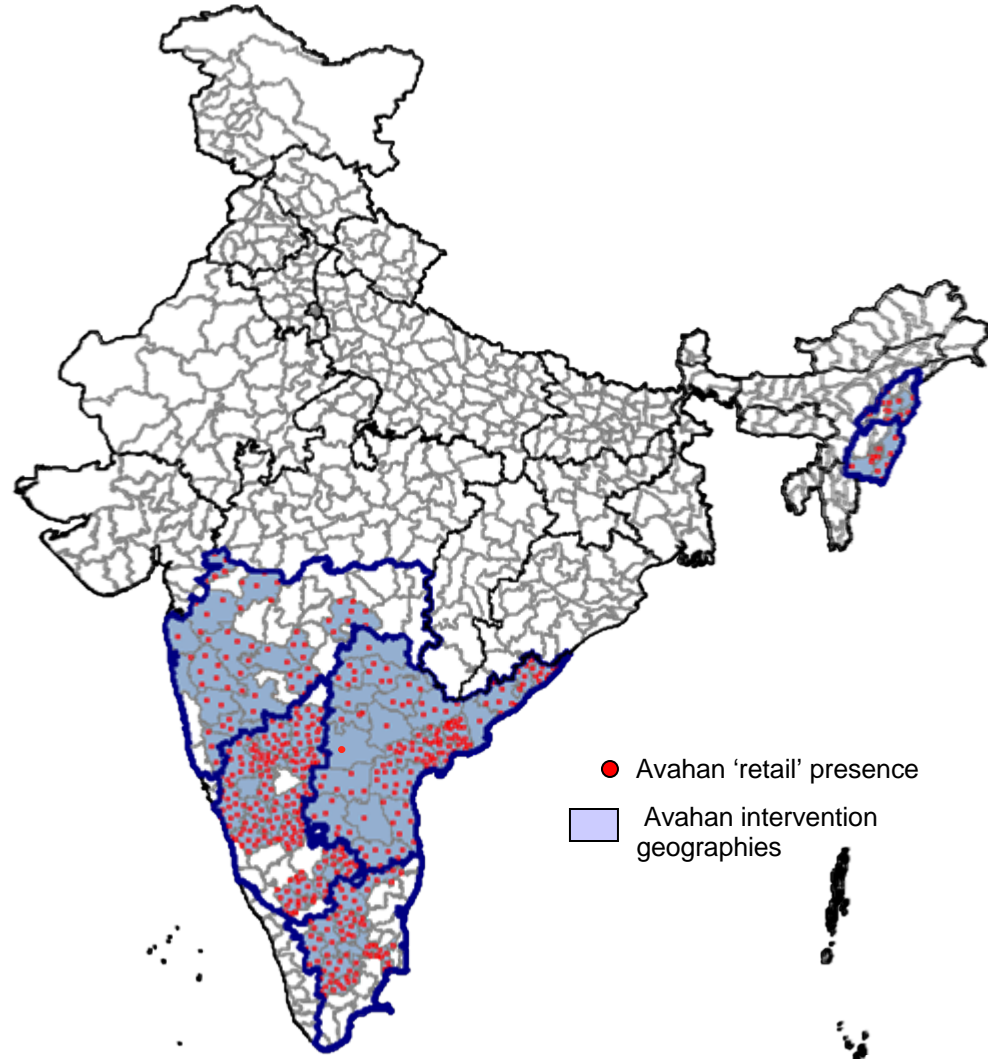
High risk groups covered

(figure in thousands)



Condoms distributed and sold per month

(figure in millions)

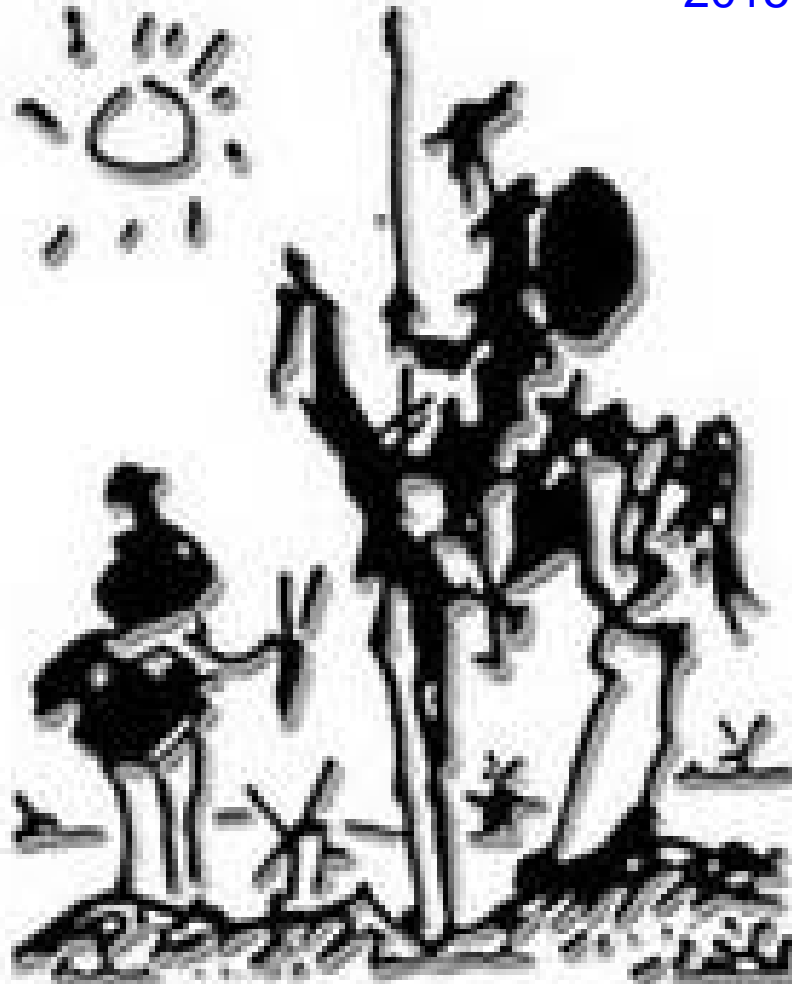


How do we build capacity?

- Role definition :
 - community as guide and adviser
 - Community for advocacy and rights issue
 - Community organization for service delivery
- Define elements and standards
- Conduct a needs assessment
- Define the division of labour
- Training
- Ongoing hand-holding

We may continue to search for the community.....

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Invitien
EI F
De lucha contra el SIDA, la tuberculosis y la malaria



抗击艾滋病、结核和疟疾



To Fight AIDS, Tuberculosis and Malaria



De lutte contre le sida, la tuberculose et le paludisme

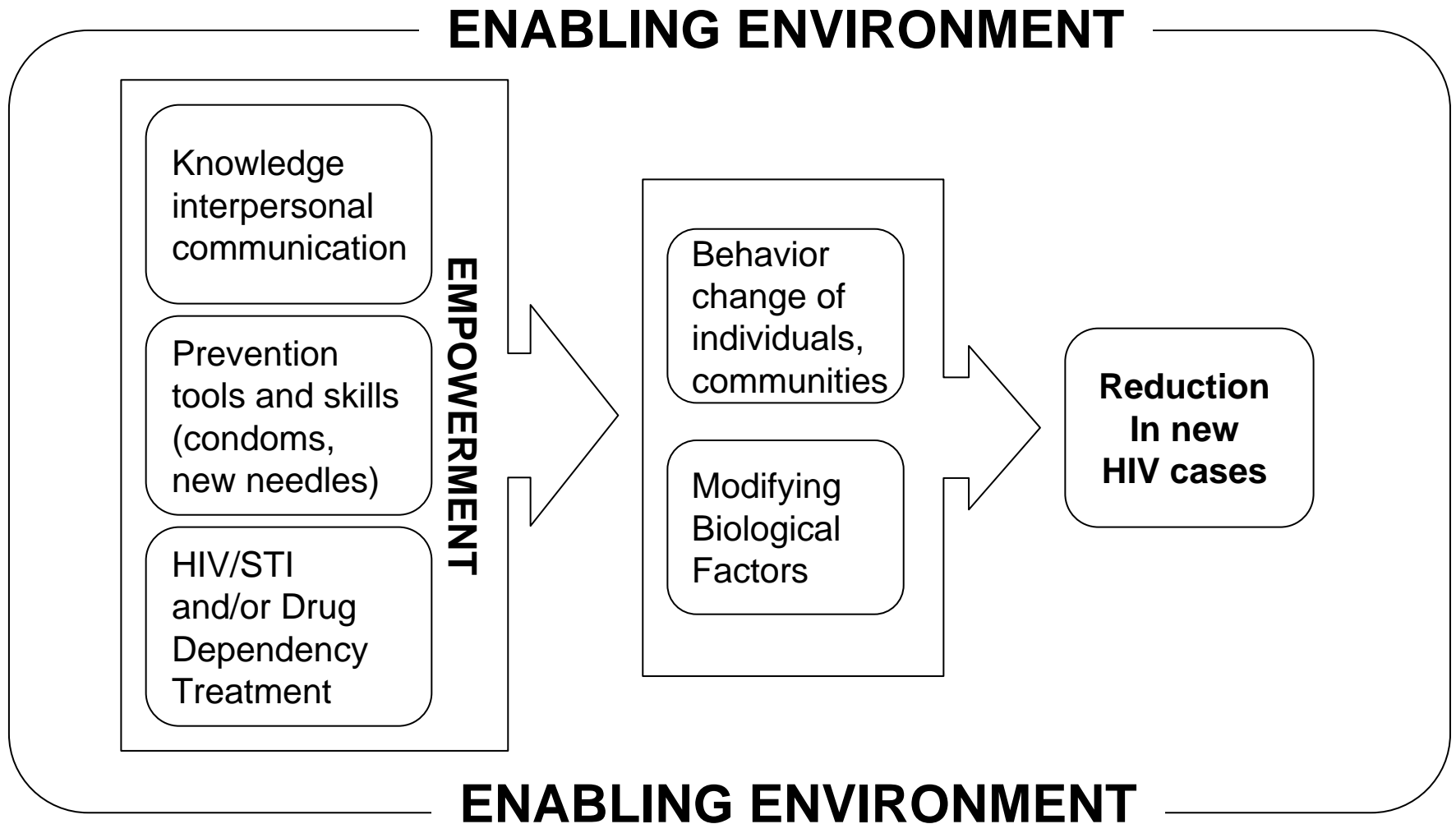


Ци в наше будущее
обальный фонд
для борьбы со СПИДом, туберкулезом и малярией

استثمار لمستقبلنا
الصندوق العالمي
لمكافحة الإيدز والسل والملاريا



It is not a choice .. It is a must..



But in the name of the community....



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A Case of Sex Workers' Organization in Bangladesh

Bangladesh is one of the few countries with a countrywide programme for sex workers. This has been made possible by government's support and donor funding from international non-governmental organizations.

The programme, run by CARE Bangladesh, has been documented by UNAIDS as a best practice. Gradually, with the help of CARE Bangladesh, sex workers' organizations have acquired the capacity to set up, design, implement, and monitor their own programmes.

However, measures introduced by the US Government have made it difficult for many international non-governmental to support sex workers' organizations. USAID will no longer fund such programmes, while DfID (a funder of the CARE Bangladesh project) stopped funding non-governmental groups when it transferred its contribution to the national Government by means of a Sector-Wide Approach' grant recommended by the World Bank. Meanwhile, the Global Fund donated some USD 40 million to Bangladesh for sex workers' interventions, but those funds were allocated to many governmental rather than community organizations. Consequently, the sex workers' organizations, a powerful vehicle for peer education, were bankrupted. Many of their leaders, who had been working full-time for the organization for several years and were no longer earning money from sex work, suddenly found themselves penniless.

Source: Deposition to the commission by the sex worker organization, Dhaka, Bangladesh, May 2007.

A real life storey from Bangladesh

- Durjoy Nari Sangha – a organization of sex worker in Bangladesh...
- Supported by DFID through CARE the organization was born based on the empowerment and CBO led principle
- 40 million loan from World Bank meant for high risk group could not be programmed for 5 years- changed 5 hands: UNAIDS- WHO- UNFPA- UNICEF; 505 returned ended in blood safety
- USAID supported part and then withdrew due to Gag rule
- Money never came to the sex worker organization till lobbying was done with the GF and the Ministry.....
- Finally, sex worker organization received money.