

MALAWI

HIV/AIDS Initiative



An opportunity to coordinate grass-roots HIV prevention with AIDS care efforts to battle the Malawian epidemic nationwide









Joining forces

Facing inadequate government services to address HIV/AIDS, Malawi's churches have stepped up to provide care and support for children orphaned by the disease, and for infected people and their loved ones. But because these churches have been working independently, their efforts are often duplicated and services are not delivered as cost-effectively as possible.

This Strategic Initiative will unify HIV prevention and AIDS care services by creating an integrated approach called the National Church AIDS Program (NCAP). This new network will coordinate efforts by three Malawi church associations. Nearly 80 percent of Malawians belong to the associations' member churches.

to fight AIDS effectively

Church associations will share knowledge and apply best practices to address the disease and its effects. Coordination of services will reduce costly overlap.

“Many churches across Africa are leading the response to the AIDS epidemic in their communities,” says Mark Forshaw, Health Sector Manager for Geneva Global. He cites a UNICEF survey of faith-based programs in six African nations, showing 7,800 church volunteers working to support nearly 140,000 orphans and vulnerable children. Faith-based organizations provide between 30 percent and 70 percent of Africa’s healthcare services, the World Health Organization (WHO) reports.

This three-year Initiative will benefit thousands of Malawians through prevention education, care and support. In the years that follow, the NCAP team will continue to manage church efforts nationwide – effectively reducing infection, helping people with AIDS live longer, more productive lives and decreasing the number of children who lose one or both parents to the disease.

Country:
Malawi

Sector priority:
Health

Key focus:
HIV/AIDS

Year 1 investment:
\$1,250,000
£635,325
€936,325

Lives to
be impacted:
28,520

Duration:
3 years

Conversions to non-U.S. currencies are based on rates in effect at the time of publication, April 2, 2007. Actual purchase amounts will be determined by conversion rates in effect at the time of purchase. }

INITIATIVE PROFILE

Why Malawi?

Nearly 15 of every 100 Malawians ages 15 to 49 are infected with HIV, UNAIDS says – one of the highest rates in the world. Ranked by the United Nations as the 12th least-developed nation, Malawi has inadequate infrastructure and resources to provide effective care to its 940,000 HIV-positive people and 550,000 orphans.

Infection rates show signs of slowing in cities, where HIV prevalence has reached 25 percent, according to WHO. But prevalence rates in rural areas, now at 13 percent, continue to rise. The virus' spread is fueled in part by high levels of travel among urban, rural and mining areas by people such as truck drivers, prostitutes, fishers and fish traders, migrant and seasonal workers, soldiers and refugees. People ages 13 to 24 are especially vulnerable, particularly girls, WHO says.



Population:
12.6 million

Living on less
than \$2 a day:
76%

Maternal mortality
(deaths per 100,000 live births):
1,800 (compared with 17 in the U.S.)

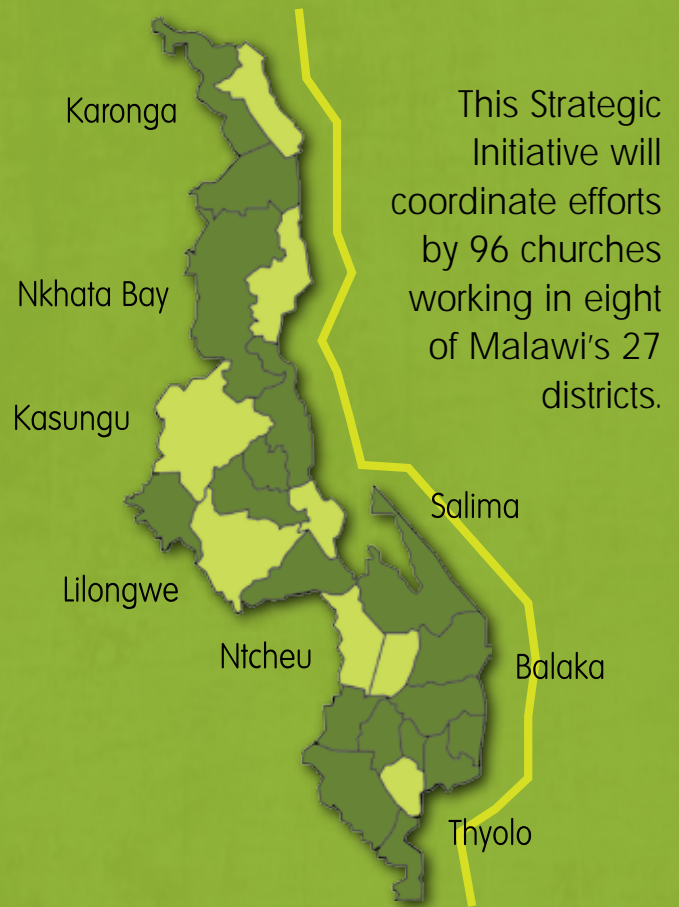
Malnutrition among children under 5:
22% (compared with 2% in the U.S.)

U.N. Human Development Index rank:
166 of 177 countries

Source: World Bank }

"As the demand for HIV/AIDS prevention, care and treatment services increases, health sector capacity needs to be built up to scale up provision of services throughout the country. The greatest challenge facing Malawi is a human resource crisis, which has generally created a lack of capacity to deliver health services, especially in rural areas," WHO reports. "Staffing is also inadequate to roll out ... other services related to HIV/AIDS, including voluntary counseling and testing. ... Nutritional support for people living with HIV/AIDS needs to be assured."

This Strategic Initiative will bolster HIV prevention and AIDS care services in eight districts across Malawi, covering both rural and urban areas. Geneva Global's team of researchers based in Malawi is prepared to work with churches to help slow the spread of HIV, especially among youth, and to improve the lives of those affected by AIDS.



- *Malawians' life expectancy in 2002 was 39 years; without AIDS, it would have been 56 years*
- *By 2010, life expectancy is forecast to fall below 37 years*
- *Malawi will lose 19 percent of its labor force by 2020 as a result of AIDS*

{ Source: World Bank, International Labor Organization

HIV/AIDS

HIV prevalence
(ages 15-49):
14.1%

Malawians with HIV:
940,000

HIV-infected
children (0-14):
91,000

AIDS orphans:
550,000

Annual HIV-
related deaths:
78,000

Source: UNAIDS

Why focus on HIV/AIDS?

This Strategic Initiative will support HIV prevention and AIDS care efforts by church-based, grass-roots organizations that work effectively with people in local communities – a proven approach that has not yet been used to its greatest advantage in Malawi.

Coordinating services among churches presents an opportunity to cut costly inefficiencies and extend help to additional people. Among orphans, for example, some children have been registered and supported by multiple churches, while other orphans receive no support. “Joining together expands services without expanding resources,” says Howard Kasiya, national HIV/AIDS program manager for the Evangelical Association of Malawi, one of the three church groups taking part. For instance, a single NCAP project coordinator in each district could do work that each of 12 churches would hire a person to do.

Establishing a solid track record for NCAP will enable churches to gain funding through the Malawian National AIDS Commission and international donors, who have expressed interest in investing if this Initiative achieves its goals. As a strong national organization, NCAP will be able to take an active role in shaping Malawi’s response to the epidemic, and serve as a role model for similar strategies in other countries.

HIV prevalence among pregnant Malawian women

14%
Northern region

14.3%
Central region

“With the increasing number of [people living with HIV] against limited resources allocated to health services, it is becoming common for [these people] to be cared for at home. Churches are taking a leading role in home-based care as a community of caregivers.”

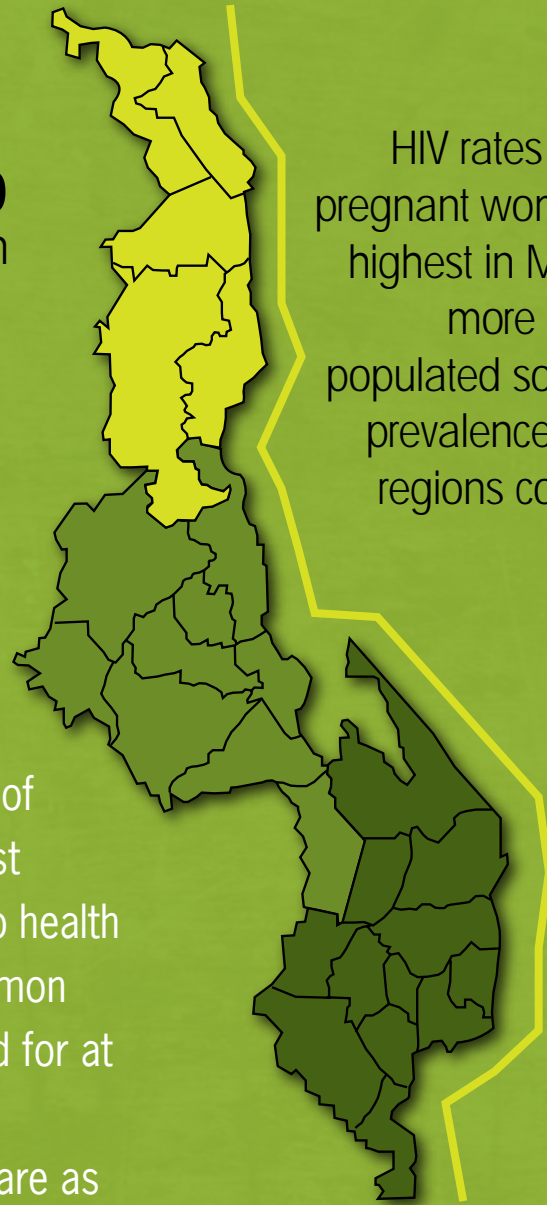
— General secretary of a Malawi-based organization funded by a Geneva Global client

21.7%
Southern region

“If we do not support orphans today, they will remain victims for the rest of their lives. If these orphans are to become productive, we need to equip caregivers with resources and skills they need.”

— National director of a Malawi-based organization funded through Geneva Global

HIV rates among pregnant women are highest in Malawi's more densely populated south, but prevalence in rural regions continues to rise.



Map source: Malawi National AIDS Commission, 2005; U.S. President's Emergency Plan for AIDS Relief (PEPFAR)

How will this work?

NCAP will coordinate efforts in eight districts by 96 member churches from three associations:

- Evangelical Association of Malawi churches in Nkhata Bay, Balaka and Kasungu districts
- Malawi Council of Churches members in Salima and Ntcheu districts
- Episcopal Conference of Malawi churches in Lilongwe, Thyolo and Karonga districts

Churches will work together in eight clusters of 12 churches each. Leaders, staff and volunteers involved in programs will undergo training in program implementation, monitoring and financial accountability. Churches will help an estimated 14,760 people through prevention education, care and support, while developing an intervention model that can be replicated across Malawi and in other sub-Saharan countries.

Within 12 to 15 years, Malawian churches under the management of the NCAP team will have an exponential impact through HIV prevention and care, decreasing infection rates among youth and high-risk people, enabling people with HIV to live longer productive lives and reducing the number of orphans. Income-generating activities will be developed in the first year of the program, and groups of churches are expected to become financially self-sustaining in maintaining their levels of impact within three to five years.

KEYING ON RESULTS

FOCUS

EXPECTED OUTCOMES

	Lives to be impacted	Local implementers needed
HIV prevention education	6,080	Eight clusters of 12 churches each
Support for orphans and vulnerable children	5,320	
Home-based care for people with HIV	5,120	
Income-generating activities	14,760	
Voluntary HIV counseling and testing	12,000	10 healthcare organizations

Five areas of focus:

1 HIV prevention education

Church associations will train 480 youth to lead clubs that meet weekly to promote healthy behavior related to HIV, such as premarital sexual abstinence and voluntary counseling and testing. Youth clubs with a total of 2,400 members will carry out outreach activities to counter stigma and inform communities through drama, dance and sporting events. It also will train 320 adult peer educators, who will lead 1,120 members of adult clubs promoting HIV prevention. In addition, a total of 1,760 pastors, chiefs and their wives will be trained in HIV prevention education and AIDS care.

2 Support for orphans and vulnerable children

Village chiefs will identify 1,000 orphans and children with terminally ill parents to receive school uniforms, school fees and educational materials. Church associations will train 160 volunteer workers for 40 community-based childcare centers, which will provide care and support for the children. An additional 160 volunteers will be trained to provide orphans and vulnerable children with educational and nutritional support, counseling and training in practical and vocational skills, benefiting a total of 4,000 children.

3 Home-based care for people with HIV

Medically qualified instructors will train 320 volunteer home-based caregivers in drug management, caregiving techniques, nursing, counseling and making referrals. Trainees will be supplied with care kits and bicycles, and will provide counseling and food to a total of 960 people with HIV and 3,840 of their family members. Volunteers also will teach caregiving skills to family members.

4 Income-generating activities

Church associations will work with village chiefs, church leaders and government representatives to start income-generating activities, such as raising animals, small-scale farming, baking or tailoring. These activities will be carried out by peer educators and by volunteers to help support orphans, vulnerable children and people with HIV and their families, benefiting a total of 14,760 people.

5 Voluntary HIV counseling and testing

Ten local healthcare organizations partnering with NCAP will provide HIV counseling and testing to 12,000 people, as well as care and support for people with HIV and their families.



GENEVA GLOBAL's

Strategic Initiative Approach

5 STEPS OF DEVELOPMENT

1 PLAN

Geneva Global's specialists and client investors explore solutions to local problems that result in clearly defined social change.

2 IDENTIFY

Determine Strategic Initiative goals and objectives.

- EXPLORE NEEDS, FOCUS OF INVESTMENT AND AVAILABILITY OF LOCAL IMPLEMENTERS
- ENGAGE POTENTIAL IMPLEMENTERS AND FUNDING AGENCIES TO CLARIFY PLANS
- REFINE GRANTING STRATEGY AND CONDUCT A BASELINE STUDY

3 QUALIFY

Conduct due diligence.

4 FUND AND MONITOR

Disburse funds, build capacity and monitor progress.

- DISBURSE FUNDING AFTER AGREEMENTS ARE SIGNED
- SHARE BEST PRACTICES
- MONITOR PROJECT AGAINST AGREED-UPON MILESTONES

5 EVALUATE

Compare performance with goals and objectives to gauge impact.

- COMPARE WITH BASELINE
- CAPTURE LESSONS LEARNED
- CELEBRATE ACHIEVEMENTS WITH CLIENT INVESTORS AND ORGANIZATIONS

A **Strategic Initiative** is a portfolio of multiyear projects within a specific geographic area.

Through collaborative investment from multiple client investors, a Strategic Initiative results in clearly defined social change, often focused on a single issue or developmental sector of global priority. Projects are researched and chosen to create portfolios that will achieve results greater than the sum of the projects. A Strategic Initiative spans three to five years. Grant amounts for individual projects within a Strategic Initiative are typically \$1 million or more, but will vary according to geography, capacity of local implementers and the specific issues addressed.

A Strategic Initiative is a solution-oriented approach designed to catalyze Life Change. It requires careful communication and planning among local leaders in a project area, Geneva Global staff and the client investor. The results benefit all involved.



Key ingredients for each Strategic Initiative include:

- Establishing clear and measurable goals for social change through a landscape study, a granting strategy and a baseline study.
- Selecting effective implementing organizations whose programs and projects align with the established granting strategy and provide the best local approaches to address local needs.
- Collaborating and sharing knowledge among funded organizations to encourage effective use of best practices. This may happen in many ways, including implementer conferences, workshops and client site visits facilitated by Geneva Global.
- Conducting ongoing monitoring and evaluation of funded projects, as well as communicating with implementers and donors on the progress of the Strategic Initiative projects.
- Conducting a final evaluation of the Strategic Initiative to determine the measurable and lasting Life Change achieved.
- Exploring how additional funding could enable the most effective implementing partners to continue addressing the most critical needs in the region. This encourages expansion of the most effective organizations and programs through results-based funding. In the end, the best of the best expand their work, improving the marketplace among social entrepreneurs.



changing lives

"After learning more about HIV prevention and control ... I am contemplating to go for an HIV test, knowing that the life I used to lead was risky – so that I can prevent myself from further spread of the virus should I be found positive or abstain to avoid contracting the virus in the event that I am negative."

– Edda Zumbo of Zomba, Malawi, who learned about HIV from a program funded through Geneva Global

"Information on HIV has ... helped me to live a responsible life so that I do not catch the deadly disease."

– Yvonne Makondetsa, a teen mother from Msondole in Zomba, Malawi, who received HIV prevention education from a project funded by a Geneva Global client

Photography credits and captions

Cover photo: **Catherine Thornton**

Clara, shown with her son, is a volunteer who provides home-based care for her neighbors with HIV. A resident of Malawi's Likuni district, Clara works through a program of the Lilongwe Diocese.

Pages 2-3: **Catherine Thornton**

The families of these children, who live in Likuni district, benefit from the Lilongwe Diocese's home-based care for people with HIV.

Page 4: **Catherine Thornton**

A woman from Kauma village, Malawi, returns home with her child after washing laundry at a water hole.

Page 14: **Catherine Thornton**

A woman in Lilongwe district, Malawi, takes a break from preparing corn to sell at the Mchesi town market.



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