

# Concept Note: Community and Home-Based Care as the Grassroots Response to HIV and AIDS in Africa

## 1. Introduction

Community-based care (including home-based care) is a critical localized health system response to addressing the diverse needs of people living with and/or affected by HIV/AIDS who face challenges in accessing the formal healthcare system. As a form of accessible healthcare, community-based care encompasses HIV treatment adherence, HIV testing, combatting gender-based violence, support for vulnerable children, and building the resilience of individuals, families, and communities. It is a holistic system created by, driven by, and intended for communities.

The need for community-based forms of accessible healthcare is underscored as the global AIDS community responds not only to the continued AIDS pandemic, but also the COVID-19 pandemic. However, many national governments and large international donors that have the potential to make a greater impact are not increasing their financial support to community-based organizations (CBOs) and international investments in HIV and AIDS have steadily been decreasing in recent years.

Therefore, there is potential for collaboration amongst funders that are investing in CBOs, and their partners who are leading implementation, to share strengths, challenges, best practices, and lessons learned. The combined voices and impact of multiple funders and their partners has the potential to build a stronger case around funding accessible, community-based healthcare.

## 2. Background

In 2019, the Stephen Lewis Foundation (SLF) received a three-year grant to further collective understanding on the innovative models of community-based care being used by grassroots organizations across Sub-Saharan Africa for people living with and affected by HIV and AIDS.

As part of this work, the SLF conducted a mapping exercise from February to March 2021 to identify likeminded funders that are supporting accessible, community-based health initiatives in Sub-Saharan Africa and to understand their perspectives on the current and future implications of COVID-19 on funding in this area. This exercise also gauged the willingness and capacity of funders to collaborate on building a global case for funding community-based healthcare models. Following the mapping exercise's desk review and in-depth discussions with funders, funders were narrowed down into a small cohort that will be invited for further collaboration.

A summary of key findings from the mapping exercise is outlined below:

- The most promising funders for collaboration are Firelight Foundation, ELMA Foundation, Segal Family Foundation, Viiv Healthcare Positive Action, and Aidsfonds.
- All funders expressed interested in the SLF's project and willingness to collaborate, contribute, or be kept informed in some capacity.
- Funders described similar trends and pivots to ensure healthcare initiatives were accessible during COVID-19.
- While home-based care is an integral approach to most CBOs supported by funders, it is not always conceptualized as home-based care.

- Many funders underscored the importance of building a stronger case for funding CBOs, particularly for this kind of work, and were enthusiastic about the leadership that the SLF was taking on this project.

The mapping exercise was a critical first step in identifying likeminded funders and facilitating intentional and meaningful conversations. In order to build on the findings of the mapping exercise, the SLF aims to facilitate further collaboration opportunities with funders and their community-based partners to build a funding case for community-based healthcare implemented by CBOs.

### 3. Objectives

The overall objective of this project is to collectively build a case for funding accessible, community-based health initiatives and community-based partners. Through collaborative learning forums with funders and their partners, this project will enable learning, sharing, and networking amongst funders and partners in order to share ideas, successes, and challenges on the impact of accessible and community-based care for HIV and AIDS and the need for greater support of community-based care in the context of COVID-19.

The four specific objectives are:

- 1. Understand the successes and challenges around accessible, community-based healthcare for HIV and AIDS for funders and their partners:**
  - a. Understand the different models of accessible healthcare for HIV and AIDS
  - b. Share best/promising practices and lessons learned from funders and their partners
  - c. Identify funding gaps and priorities of funders and partners
  - d. Identify innovative forms of accessible healthcare
- 2. Share how COVID-19 (and other epidemics) has shaped thinking about and funding for accessible healthcare initiatives for HIV and AIDS:**
  - a. Understand how COVID-19 has shifted funding priorities and amplified the need for accessible, community-based healthcare and funding for CBOs
  - b. Identify common trends and promising practices about innovative approaches to community-based care for HIV and AIDS during COVID-19
  - c. Examine the short and long-term implications of pivots made by funders and their partners during the pandemic
- 3. Identify opportunities for further collaboration amongst funders and their partners:**
  - a. Examine strategies to increase responsiveness and resource mobilisation for community-based health responses
  - b. Determine the best methods for continued collaboration and networking amongst funders and partners
- 4. Disseminate learning report findings amongst the global AIDS community in order to build a stronger case for funding community-based healthcare for HIV and AIDS:**
  - a. Share learning report with global AIDS community
  - b. Present learning report at 2022 International AIDS Conference

### 4. Results

There will be four main results of this project, including a partner roundtable, a funder roundtable, a learning report, and dissemination of the learning report, each outlined below:

- 1. A partner roundtable** with community-based partners involved in the implementation of community-based healthcare for HIV/AIDS. This roundtable will focus on the realities and

innovation in community health during COVID-19. This includes developing a better understanding of the breadth of community health care models and the sharing of promising practice between partners. Key discussion themes will include:

- a. What are the different models of community-based healthcare? What are their respective strengths and weaknesses?
  - b. How have responses changed during COVID-19? What are the short and long term implications of the pivots made during COVID-19?
  - c. What are the main challenges faced by CBOs during this time?
  - d. What are the funding needs and priorities of CBOs? What kind of support is the most/least useful from funders?
2. **A funder roundtable** will build off of the partner roundtable and bring together likeminded funders that support community-based healthcare for HIV and AIDS. This roundtable will engage interested funders in support of deepening collaboration, increased responsiveness, resource mobilisation, and information sharing around the impact of community health systems in the context of COVID-19. Key discussion themes will include:
- a. Why is it important for funders to support community-based healthcare and CBOs?
  - b. How is impact demonstrated in terms of effectiveness, reach, innovation, sustainability, and partnerships?
  - c. What are strategies to raise the profile of and increase funding to CBOs?
  - d. Who should the target audience be for increasing funding to community-based healthcare (i.e. national governments, major donors, private sector, etc.)?
3. **A learning report** that will be informed by the roundtable discussions and any other information shared by funders and partners. The report will highlight the impact of accessible, community-based healthcare for HIV and AIDS, its intersection with formal healthcare, and the increased need for community-based care in the context of COVID-19. It will also highlight the significance of community-based organizations and their role in making healthcare accessible to community members.
4. **Dissemination of the key findings** from the learning report to the global AIDS community, including a presentation at AIDS 2022: The International AIDS Conference either as a satellite session or a formal conference session.

## 5. Methodology

The main methods for this project will be qualitative surveys and roundtables.

1. **Surveys:** a short survey with closed and open-ended questions will be sent by email to participating funders and their selected partners in advance of the respective roundtables in order to ask preliminary questions that will be used to guide the discussions. This survey will also ask for participants' availabilities in order to schedule the roundtables for August or September 2021.
2. **Roundtable Discussions:** two separate virtual roundtable discussions with six funders and 2-3 of their partners each to inform the learning report. Each roundtable will be a three hour session to allow ample time for discussion. Roundtables will take place separately in order to allow both groups to speak openly without influence or bias.

## 6. Timeline of Activities

There will be two virtual roundtable discussions with funders and 2-3 of their selected partners. Each roundtable will be moderated by an external facilitator hired by the SLF. The consultant will liaise with funders and partners to explain the project, invite representatives to both roundtables, send out a preliminary survey to guide discussions, and share details as they are confirmed.

The roundtables will aim to be scheduled for August 2021, with the caveat that timelines can be shifted to September 2021 if a later date is more conducive to funders’ and partners’ schedules. The consultant will subsequently use the outcomes of the roundtable discussions to inform the learning report, which will be shared with all roundtable participants for feedback.

The report will be presented at AIDS 2022 – the International AIDS Conference taking place in Montreal, Canada (and virtually) from July 29<sup>th</sup> – August 2<sup>nd</sup> 2022. The project timeline is outlined in Figure 1 below.

**Figure 1: Project Timeline**

