



WHY HIV/AIDS RESEARCH PARTNERSHIPS REALLY MATTER

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In this presentation

We will talk about:

- The need for HIV/AIDS Research Partnerships
- The short, medium and long term impacts of Research Partnerships based on literature
- Sub-Saharan Africa HIV/AIDS Research Partnership Initiative (SAHARA)
- International HIV/AIDS Research Partnership Initiatives

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The need for HIV/AIDS RPs

The National Institutes of Health (2001)

“The unprecedented & accelerating HIV/AIDS in Africa, particularly among women & young people, requires focused, intensified, innovative, multi-disciplinary research partnerships -alliances, networks, coalitions, consortia, collaborations- that will jointly conduct research responsive to local African needs, challenges, priorities and realities and a responsible common search for solutions to the HIV/AIDS challenge which is confronting humanity as a whole”

There is need to move from struggle for territory & authority (CCC, 2004):

“I know more because I’ve studied”; “I know more because I live in the community and know the people”. The community agency is not a “site,” participants are not “subjects”; bidirectional communication, provider-community-partnered research is essential for sustained community-based technology transfer. Research has no meaning without consumers”

The 8th UN MDG, paraphrased (Economic Commission for Africa, 2005)

“Global partnerships between developed and developing nations are needed in order to share, generate and transfer knowledge as well as find solutions to specific problems, including the HIV/AIDS epidemic due to its developmental impact on the social, economic, and political sectors”

Impacts of HIV/AIDS Research Partnerships

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graph TD; A[Impacts of HIV/AIDS Research Partnerships] --> B[SHORT-TERM IMPACTS]; A --> C[MEDIUM-TERM IMPACTS]; A --> D[LONG-TERM IMPACTS]; B --> B1[Sense of ownership]; B --> B2[Capacity Development]; B --> B3[Increased scale / scope of activities]; B --> B4[Shared cost and risks]; B --> B5[Ability to deal with Complexity]; B --> B6[Research education and training]; C --> C1[Research coordination]; C --> C2[Strengthened Linkages]; C --> C3[Improved integration]; C --> C4[Reduction of unhealthy competition]; C --> C5[Knowledge sharing]; C --> C6[Commitment]; D --> D1[Credibility]; D --> D2[Recognition]; D --> D3[Competitiveness]; D --> D4[Policy influence]; D --> D5[Consumer satisfaction]; D --> D6[Value for research]; D --> D7[Utilization of Research findings];
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SHORT-TERM IMPACTS

- Sense of ownership
- Capacity Development
- Increased scale / scope of activities
- Shared cost and risks
- Ability to deal with Complexity
- Research education and training

MEDIUM-TERM IMPACTS

- Research coordination
- Strengthened Linkages
- Improved integration
- Reduction of unhealthy competition
- Knowledge sharing
- Commitment

LONG-TERM IMPACTS

- Credibility
- Recognition
- Competitiveness
- Policy influence
- Consumer satisfaction
- Value for research
- Utilization of Research findings

SAHARA –

A Response to the need for HIV/AIDS RPs

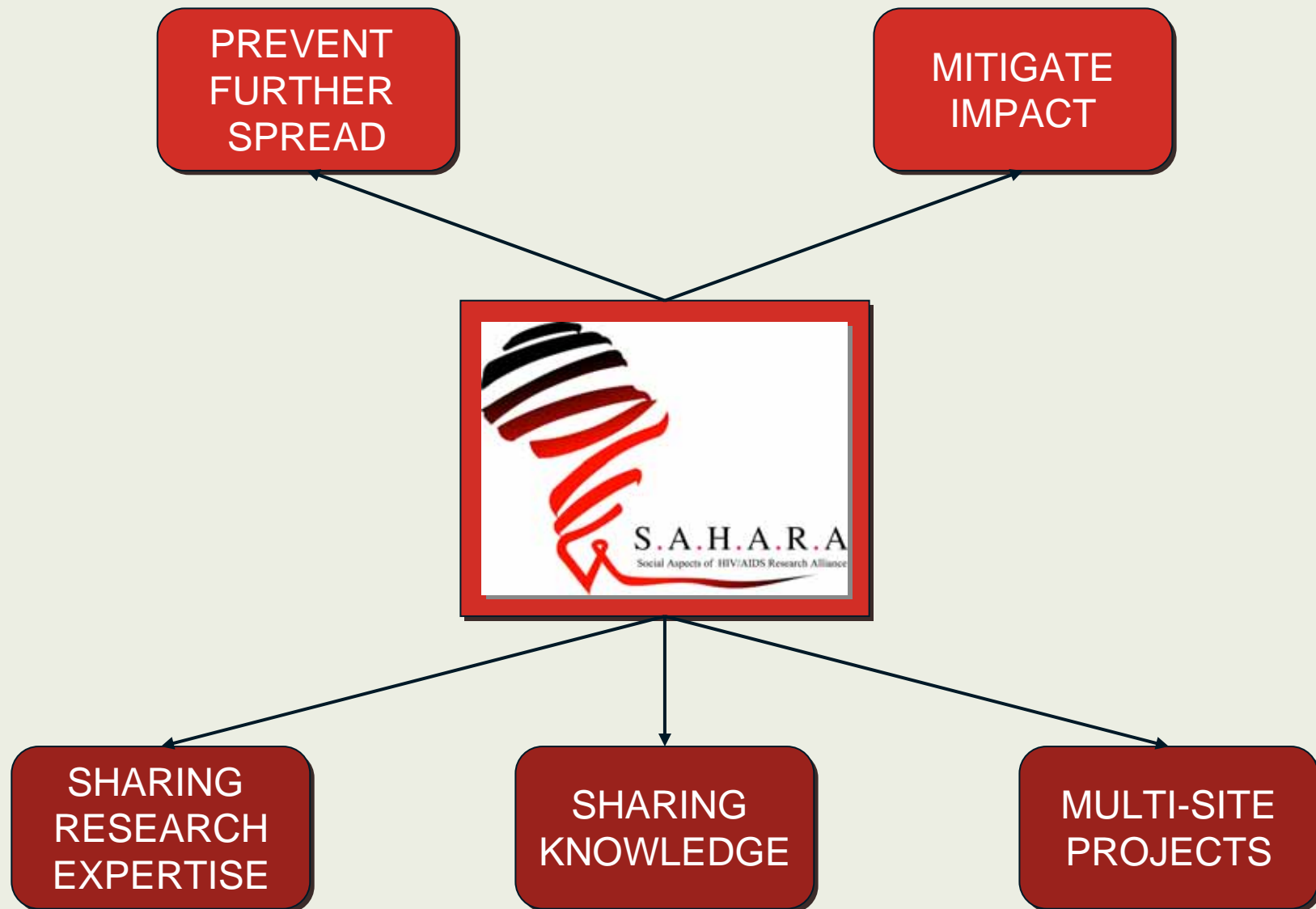


S . A . H . A . R . A

Social Aspects of HIV/AIDS Research Alliance

www.sahara.org.za

Overview of SAHARA





Modus Operandi

- Operates in **Sub-Saharan Africa**
- **3 regional structures** responsible for defining own research priorities
 - East/Central Africa based in GLUK, Kenya led by Prof Dan Kaseje;
 - West Africa at *Université Cheik Anta DIOP*, Senegal led by Prof Cheick Niang
 - Southern Africa based in the HSRC, was led by Prof Geoffrey Setswe
- **Regional UN agencies** (e.g. WHO, UNAIDS, UNICEF, UNDP, UNIFEM)
- **Regional economic communities** (e.g. EAC, ECOWAS, SADC)
- **Continental Structures** (e.g. AU, NEPAD, CODESRIA)
- **Government Departments** (e.g. Stats bureaus in Botswana, Swaziland)
- **National Universities** (e.g. Botswana, Lesotho, Swazi, Mozambique, Zim)
- **National Research Institutes** (e.g. Botswana/Harvard Partnership, National Institutes of Health Research in Zimbabwe and Mozambique)
- **Local and international donors** (e.g. UNAIDS, EU, DFID, CIDA, DGIS)
- **NGOs, CBOs, FBOs**
- **Guiding Principles:** Common goal, Mutual trust, Responsibility sharing, Transparency

COLLABORATIVE PROJECT	RESEARCH PARTNERS	FUNDER	IMPACTS
Development of harmonized minimum standards for guidance on HCT/PMTCT in SADC (2008/2009)	SAHARA focal points in 15 SADC countries	SADC, R1302,664	Adoption of standards by SADC countries
HIV/AIDS policy review in Botswana, Mozambique, Lesotho, South Africa, Swaziland/ Zimbabwe(2001/2002)	SAHARA focal points in 6 respective countries	WK Kellogg Foundation US \$ 80 000	Influence on regional strategies
Strategy for the care of AIDS orphans OVC in Botswana, South Africa and Zimbabwe (2002/2007)	HSRC, NMCF, University of Botswana, Masiela Trust Fund, Botswana FACT, Zim Biomedical Research & Training Institute, Zim National Institute of Health	WK Kellogg Foundation US \$ 5 million	Best practice OVC interventions recommended for adoption and scaling up in SSA
Replication of SA HIV prevalence, behavioral and mass media survey in Botswana, Lesotho, Mozambique and Swaziland, (2003-2006)	SAHARA, SA MRC, CADRE, governments & NGOs	UNAIDS, WHO /AFRO-R5, 900.000	M & E of HIV/AIDS response in the region-NSP
OVC technical assistance to Malawi, Mozambique and Swaziland (2004-2006)	SAHARA core office/ Southern Africa Regional office	Wk Kellogg Foundation R11 949, 999	Strengthened community based OVC support systems
Stigma reduction and behavioral risk reduction interventions among PLWHA in South Africa, Senegal and Kenya,	HSRC, SAHARA West Africa, SAHARA Southern Africa,	DFID,CIDA and DGIS R3,602,280	Replication in Botswana, Lesotho, Swaziland, Mozambique & Angola



COMMUNITY HIV/AIDS MOBILIZATION PROJECT

- **Partnership:** A collaborative HIV Prevention Project among families, providers, community agencies and researchers in the USA being replicated in other parts of the world
- **Goal:** To identify relevant and effective HIV prevention strategies that are acceptable to consumers
- **Guiding Principles:** the development of shared aims and shared decision-making power, the recognition and use of skills, and the creation of opportunities to build communication and trust.
- **Impact:** Joint ownership and sustained commitment because all research partners were involved in every step: aims, design, measurement, procedures, implementation, evaluation, and dissemination. It helped parents and kids talk about HIV and helped adolescents negotiate sexual situations.
- More information
 - www.champnetwork.org



The logo consists of four overlapping squares in a 2x2 grid, rendered in a red outline style.

HIV Prevention Justice Alliance

- **Partnership:** It is a national network of over 70 groups building a unified, effective movement for HIV prevention in the United States
- **Goal:** To use research as a means of framing and answering questions on HIV and issues of justice in overlooked communities
- **Guiding Principles:** Trust, effective communication, shared goals, and equal power
- **Impact**
 - Contribution to New Research agenda – inquiry into inequality and social determinants of health (poverty, unemployment, housing)
 - Contribution to National AIDS Strategy
 - Contribution in deciding where research money is spent and how
 - Contribution to health reform that will include some degree of preventive care
 - Attracted multi-year funding, resources, and provided an opportunity for critical self-examination, led to research infrastructure development

- **Partnership:** A US-based partnership which unites people who are formerly imprisoned, HIV policy advocates, researchers, AIDS service providers, prison justice organizers, people with HIV and other community members, and organizers from allied movements.
- **Goal:** To build a powerful community-based movement aimed at addressing the ways that imprisonment makes communities more vulnerable to HIV.
- **Guiding Principles:** Respect, honesty, transparency, mutual trust, commitment, shared goals
- **Impact:** Policy Changes







Summary

- Although partnerships and consensus take a lot of time and effort and may be complicated, they really matter
- The depth and breadth of the epidemic requires more than just one sector of society. There is a need for concerted effort.
- Research should not just come from academic institutions to communities; advances should be developed with and in communities.
- Competition is no longer appropriate – what is needed is complementarity and synergy
- HIV/AIDS RPs should become a norm not an exceptional practice
- HIV Research can only make a decisive difference if scientists, the public, and political and economic powers, work together
- If we are to make a breakthrough in HIV scientific knowledge and research in Africa, we need to work together

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Yes, we can! Yes, we will!





Selected References

- Bonhomme, J.J.E. Building Research Partnerships. Morehouse School of Medicine
- Community Collaboration Core 2004. Building partnerships for HIV Research & Evaluation with the community.
- Currie, M; King, G.; Rosenbaum, P.; Law, M.; Kertoy, M.; & Specht, J. 2005. Partnerships in Health and Social Services. Evaluation and Program Planning: A mode of Impacts of Research Partnerships, 28 (4): 400-412
- Dodgson, M. Strategic Research Partnerships: their voice and some issues of measuring their extent and outcomes – experiences from Europe and Asia. Proceeding from an NSF Workshop. <http://www.nsf.gov/statistics/nsf01336/plss.htm>
- Freyvogel, T.A. & Tanner, M. 1997: Forschung in Ifakara. Vom Feldlaboratorium des Schweizerischen Tropeninstituts zum tansanischen Ifakara Centre. In: 75 Years Baldegg Sisters, Capuchin Brothers in Tanzania
- Hall, A; Sivamohan, M.V.K.; Clark, N.; Taylor, S.; Bockett, G. Why Research Partnerships Really Matter: Innovation Theory, Institutional Arrangements and Implication for Developing New Technology for the poor
- Organisation for economic co-operation and development 2004. Public-private partnerships for research and innovation: an evaluation of the Dutch Experience
- Oruko, L. International Research Partnerships support to Regional Collective Action in Eastern and Central Africa. Association for Strengthening Agricultural Research in Eastern and Central Africa
- Swiss Commission for Research Partnership with Developing Countries. 1998. Guidelines for Research in Partnership with developing countries: 11 Principles Traore, K. 1996. Preface. In: Sempervira, number 5. Centre suisse de recherches scientifiques en Cote d'Ivoire. 01 BP 1303 ABIDJAN 01
- Tanner M. et al. 1994: Developing Health Research Capability in Tanzania: From a Swiss Tropical Institute Field Lab to the Ifakara Centre of the Tanzanian National Institute of Medical Research. Acta Tropica 57, 153-173



Acknowledgements

- Conference Organizers for the invitation and for Sponsoring Conference attendance
- HSRC/SAHA for permission to be at this Conference
- Ms Marise Taljaard for assisting with Presentation Layout
- SAHARA members and partners without whose efforts and commitment there would be no story to tell

THANK
YOU



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