

Supporting community action on AIDS in developing countries



**The
Future of
Capacity
Building**

My life as a capacity builder

- Make up tips for transgendered traditional Australian Aboriginals
- USAID compliance training
- Dating guide for young gay men
- Strategic planning for national AIDS programs
- Improving governance systems in Linking Organisations
- Sexual health for Mongolian prisoners
- Finance skills for Bangladeshi Hijra
- Developing a MSM+ network in Asia
- Advocacy skills for PLHA

The past

- My Colleagues and I didn't know we were “building capacity”
- Rather we just knew it was critical to find ways to empower affected communities so that they could control of how they responded to the epidemic

Just got with the
Job – didn't see
capacity building
as a separate
function

We have a
moment in time
when capacity
building is sexy

Need to develop
new models that
show value of
capacity building

Capacity building is more than training

- In the past capacity building was equated with training (and many still see it this way)
- If there was a perceived gap in capacity the solution was to run a workshop
- How many times have you seen capacity building workshops on xxx been repeated for the same organisation?
- We need to move beyond the workshop mentality and look at capacity building in a more holistic sense.
- Individual skills are only a part of the complex mixture of elements that constitute capacity to perform a certain function effectively and consistently over time

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Capacity building & technical support: why is it so critical now?

- At least USD 66M budgeted for CB/TS provision directly related to GF + 200M in WHO & UNAIDS budgets for AIDS, TB & Malaria.
- Addressing the inefficiencies in the “CB/TS market” to receive greater attention as the finances get tighter and donors shy away from supporting large scale implementation. How they are addressed will have major impact on community responses.
- The Alliance is seizing this as an opportunity to shape the response as well as its own future. We are approaching CB/TS as:
 - Critical to ensuring success of our programming and onward granting
 - An additional way of achieving our mission – extending our influence
 - A source of sustainable funding

Investment is being made in civil society

- Funding flows to CS significantly increased mirroring Global increases in HIV/AIDS funding
- Money flows now far more IN country rather than from outside (e.g bilaterals to mechanisms to national sub granting)
- The funding environment from a CSO (and CBO) perspective is (increasingly) very complicated
- CSO funding increasingly 'contract driven' rather than capacity building
- Donors/multilaterals and donors are increasingly seeing the value in investing in civil society.

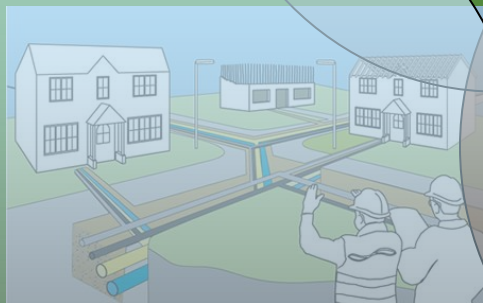
How do we develop the capacity of civil society to respond to HIV/AIDS?

Bricks

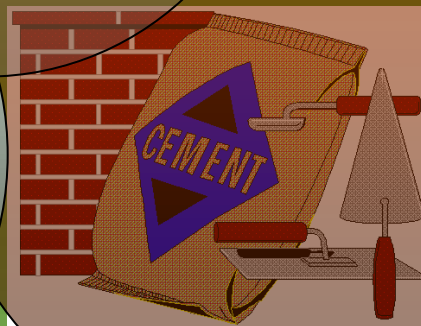


Create capable CSO's

Ensure appropriate policies, institutions, norms and laws.



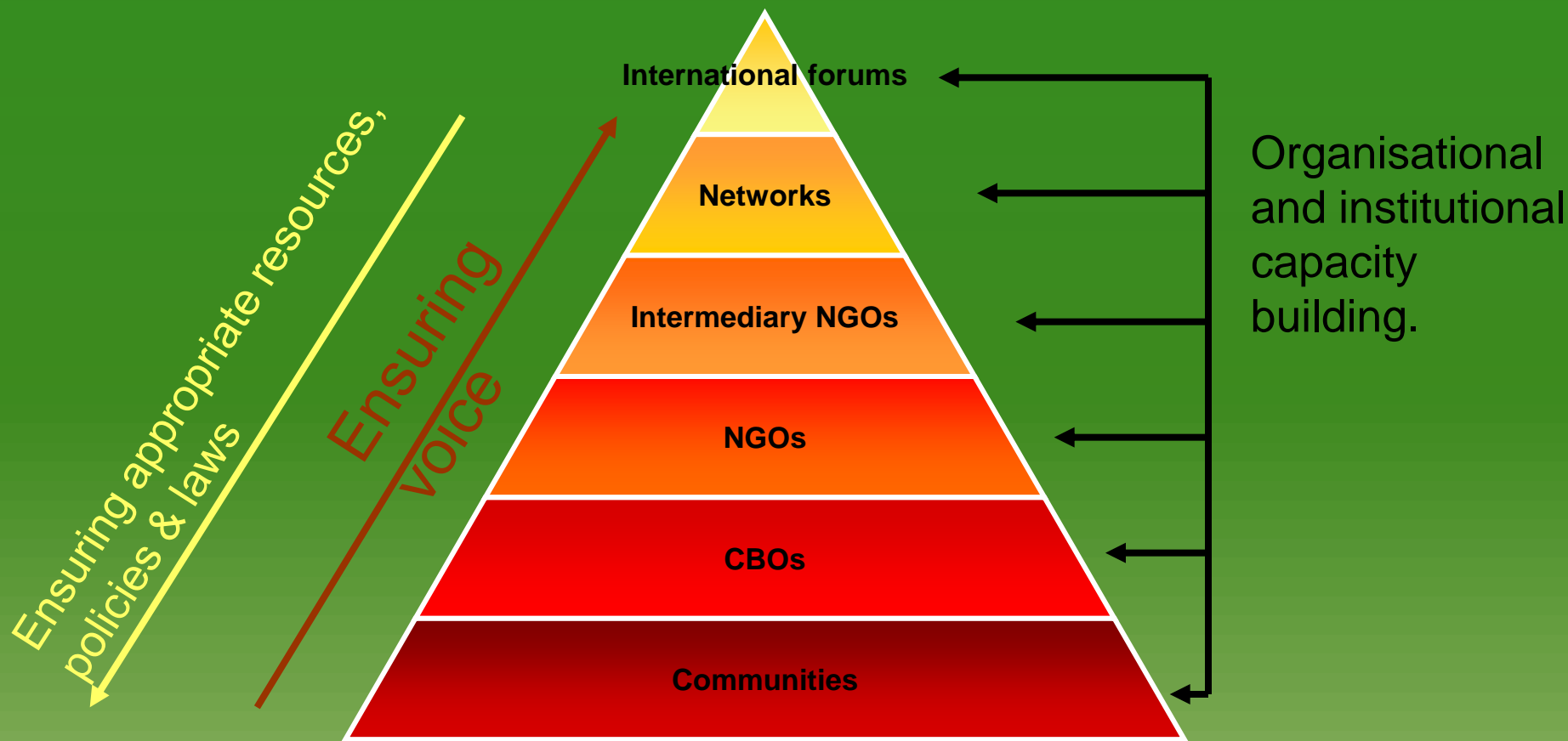
Building Site



Mortar

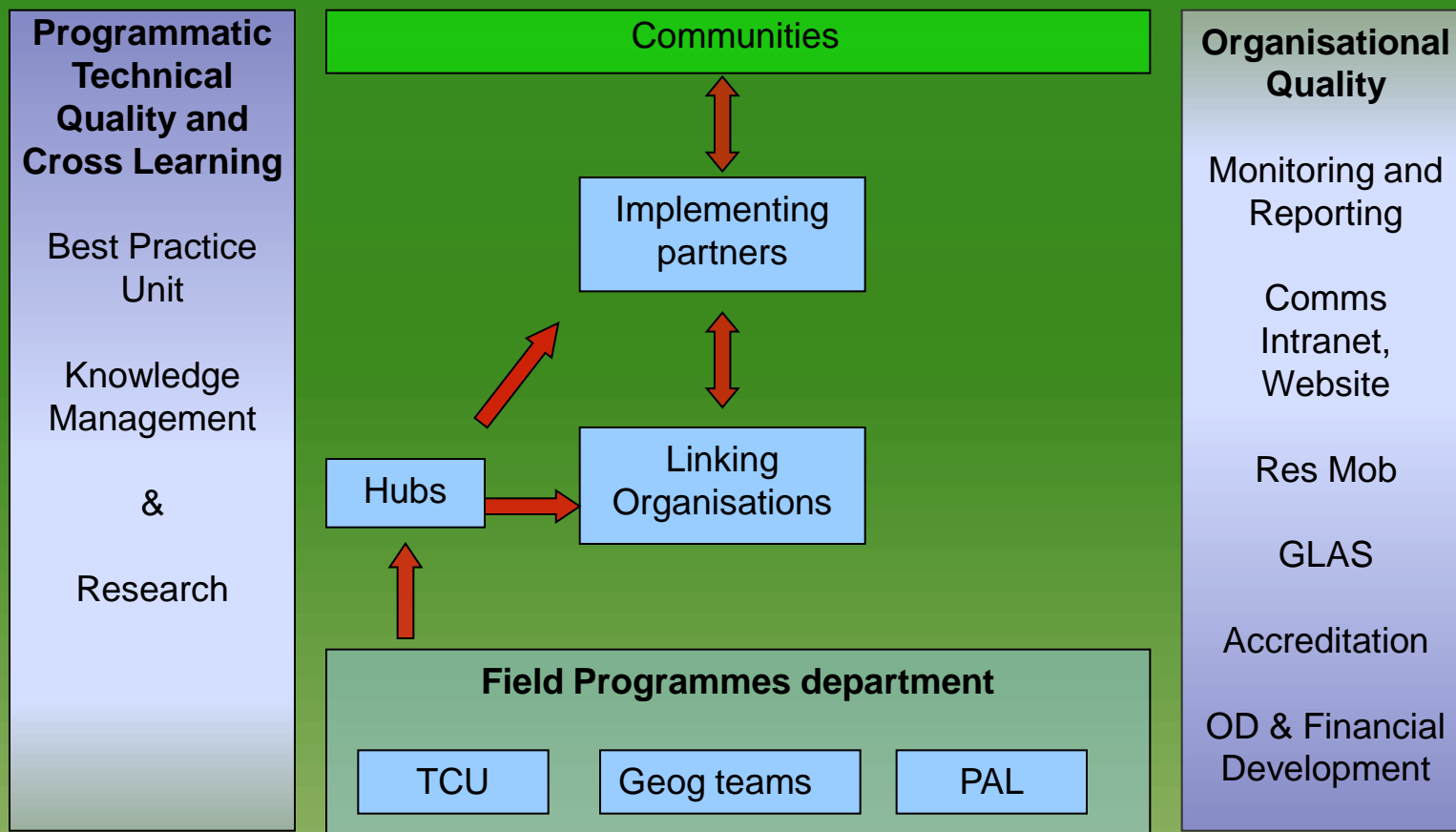
Create dense, frequent and overlapping networks of communications between CSOs

So what does this mean in practice?



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Changes to the Alliance model to respond to the new environment



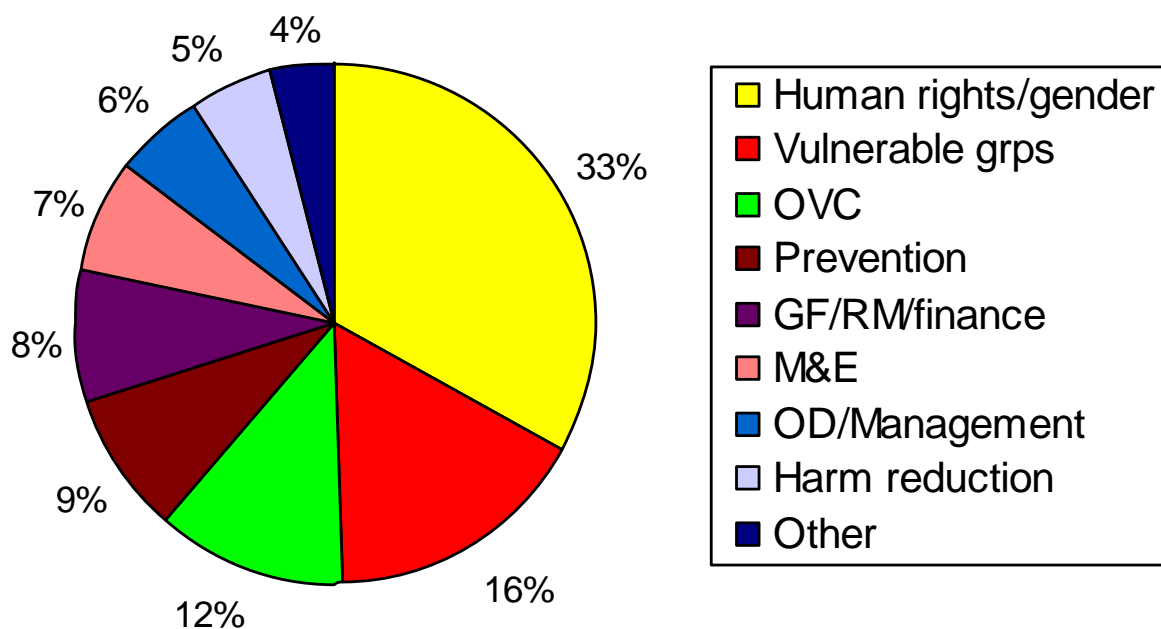
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The future we are working towards

- Needs for capacity building and HIV programme development identified and prioritised by LOs themselves.
- Hubs have a pool of CB/TS providers locally and from the region who can develop long term relationships with organisations and individuals ... Secretariat teams assist in the selection and development of these people. Linked with each other and relevant Alliance staff through Communities of Practice (CoP).
- Alliance standards and tools are available online in at least three languages.
- Hubs' staff are skilled in CB/TS management... and know when and how to seek expert technical support. CB/TS is provided over time
- Emerging CB/TS providers mentored by experienced TS providers.
- Issues and learning from assignments feeds back into CoP so that we all learn from them and develop appropriate responses.
- Performance of LOs and other hubs clients improves over time ... and is demonstrated by programme evaluations.

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CB can be driven and provided locally/regionally



But can they act on their capacity?

No
(often)

- We often neglect building/changing the capacity of the systemic/enabling environment – in which all the capacitated individuals/NGO's have to function
- And what has often been our answer?
 - more capacity building of the same individuals and NGO's
 - yet another workshop

Rather than tackling the more difficult issue of systemic/enabling environment capacity.

Quality and impact

- We need standards and consistency in the HIV community so that we can develop meaningful measures that show a clear link between CB/TS inputs and impact on the epidemic
- AIDSTAR Two is a mechanism that will help set the standards and the Alliance is a part of the AS2 consortium, providing the civil society perspective. (more on this later today..)
- The Alliance Good Practice Guides act as a complimentary resource to support implementation of good practice HIV programming standards – a key feature of our plans to define and advance the Alliance approach to HIV programming. These good practice programming standards will act as a kind of ‘quality mark’ for Alliance HIV programmes.

The Future

I might still be running make up tips workshops
(I hope not!)

BUT....

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- The request would have come from civil society themselves because they have already identified their capacity gaps
- A comprehensive plan addressing the capacity need in a holistic way would be developed
- Financial resources for the support would be flowing to and managed directly by the NGO
- Resources to provide the support would be sourced locally and managed through local hubs
- The support would not be 'one off' but part of a comprehensive package provided over time
- The support would be designed in such a way as to allow for mentoring of new CB providers

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- Effective ways to evaluate and measure impact against agreed standards would be developed
- Lessons learnt would be shared through Communities of Practice
- Clear links between the support and impact on the epidemic can be made (over time)

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They would look fabulous



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As the international community we will change our capacity building focus to the systems and environment to enable the make up tips workshops to happen by members of their own communities .

We have capacitated individuals and their organisations so we now need to work to ensure that they are able to act upon their capacity.

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The Future



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