

The manifesto for Leadership for NGO/CBO sectors in the fight against HIV/AIDS¹

XV International AIDS Conference

(Final draft as of 15th July)

We have learned many things over the past 20 years. We have succeeded and we have failed. The community sector now needs to address new challenges and opportunities as we aim to influence the course of the pandemic in the next 20 years. We need to base our thinking in the lessons we have learnt in the last two decades: we need to re-think our tactics and re-tool our practices in order to scale up our responses. NGOs must pass on lessons learned, successes and failures to successive generations.

We are leaders. This leadership is defined by the actions WE take and the legacy WE leave through the leadership WE show. WE understand that the greatest privilege of leadership is the chance to improve the lives of those infected with and affected by HIV/AIDS.

WE will remember that the deepest of all human needs is the need to live for something greater than ourselves. Therefore, WE will stay focused on the higher meaning of the work that WE do and how it improves the lives of human beings.

WE will work harder to find innovative ideas and always see possibility where others see adversity. We will approach old and new partners to seek visionary thinking and will forge partnerships with those who are the most excluded and most affected.

Foremost, we renew our commitment to the GIPA Principle. People Living with HIV/AIDS must be involved in the policy making process and discussion of priorities to be addressed. NGOs and CBOs must incorporate mechanisms to get input and feedback from and to PLWHAs. We will strengthen our own effort to implement the GIPA Principle in our own organizations and will advocate for other stakeholders to do the same.

We vow to continue to integrate the following principles and commitments into our work:

1. A human rights based approach that promotes and respects the rights of all infected and affected by HIV/AIDS without discrimination

A human rights framework is must be our overarching pillar, where all our program design should rest. This approach needs to include respect for human dignity, protection against stigma and discrimination, gender equality, equal access to HIV/AIDS prevention, treatment, care and support, attention to the most vulnerable and promotion of accountability and transparency, including community participation in policy making and program delivery, monitoring and evaluation.

¹ Based on discussions at the NGO Leadership Forum convened by ICASO, the International Council of AIDS Service Organisations

We will continue to advocate for governments to strengthen their commitment to the human rights of those infected and affected. We need to continue to advocate strongly, without equivocation, that women, gay men, men who have sex with men, sex workers, intravenous drug users, transgender and transsexuals, and prisoners are visible in our responses, and that those who work with these groups are not excluded from accessing resources and other necessary services. This approach needs to be inclusive of the most vulnerable groups to avoid marginalization and discrimination. Actions to be taken must include advocacy for changes on laws that violate human rights. NGOs and CBOs must also advance the capacity of the sector to use this approach, that will assist us to hold ourselves and our governments accountable,

2. Partnership building

Most community organizations are still working in their own “boxes”: those who advocate for access to treatment are, sometimes, confronted by those working on prevention (and vice versa); those advocating for economic development programming are at odds with those whose focus is uniquely AIDS. In many countries, governments and civil society organizations are still at opposite sides. Partnership should be a mean and not an end in itself and will support our commitment to be more transparent and accountable. This must include partnership with those who we are accountable to, through involvement and empowerment.

We recognize the importance of partnership building among civil society actors, in different settings and working in different areas. We also recognize that it is vital that governments and civil society work together to scale up the response to HIV/AIDS. However, we also recognize that the partnerships should grow up from the grass roots and should not respond to external factors or donor agendas.

These partnerships should include support for the implementation and revision of the MDGs.

3. Integration of HIV/AIDS within other issues

The response to AIDS needs to take into account, among other things, (1) the impact of the world's economy (trade, underdevelopment and poverty); (2) the impact of the world's politics (wars and conflict); (3) the impact of the world's international frameworks for action (Millennium Development Goals and the UNGASS Declaration of Commitment); and (4) the impact of social factors (gender inequality, violence against women, marginalization of certain behaviors, religion and cultural beliefs and practices).

It is important to understand how these issues have an impact on our priorities and how we can incorporate AIDS issues into the decision-making processes in other areas that will affect our work. We need to re-tool our thinking and our efforts from the narrow “boxed” interests of AIDS to more inclusive and expanded approaches that include priorities in environment, women's issues, education, poverty and impact mitigation, and human rights. More alliances need to be built with other non-state actors, specifically NGOs working on other issues.

NGOs and CBOs need to work with governments to integrate HIV/AIDS prevention, care, treatment and support, and impact mitigation priorities into the mainstream of development planning, and participate more strategically in poverty eradication strategies, national budget allocations, and sectoral development plans. This would require new or refined skills and a broader frame of thinking to work within national development plans and to address structural and root causes of the epidemic.

4. The realization of the prevention-treatment continuum

Two decades into the epidemic, we have learnt that the most effective responses to HIV/AIDS are those that address prevention, treatment and care simultaneously. In an era of expanded treatment access, we should not forget about prevention. Enhanced access to treatment should enhance prevention efforts. Without treatment, prevention initiatives lack incentives. Without prevention, treatment programs will not be able to maintain the pace of the rates of infection. One balances the other. NGOs and CBOs must not shy away from identifying the barriers to effective prevention (culture, religion and tradition among others) and should continue to include issues around safer sex and harm reduction practices within their programming.

5. Resource mobilization

New and fresh money should be put toward new and innovative programs. NGOs and CBOs will advocate to governments and funders alike to establish new funding strategies and schemes to respond to the needs of those most affected. We will also advocate for more involvement of communities and people living with HIV/AIDS in the decision-making processes and the allocation of resources.

In addition, we will evaluate our strengths and weaknesses and will refocus our efforts accordingly. This refocusing of efforts will be done jointly with the refocusing of resources allocation within our own organizations.

We need to emphasize that we can create absorptive capacity for funds. For this, among other things, human resources need to be trained to respond to new priorities and challenges. Activists and advocates need to transfer their wealth of experiences to the new generation. The new generation needs to learn from what has been done and learnt.

6. Transparency and accountability

As NGOs and other non-state actors continue to question the decisions and processes of our governments and institutions, we must also look at our own structures and processes to ensure that we too are accountable to the people we serve, and our decision-making processes are transparent. We must not shy away from questioning ourselves and challenging our assumptions.