Transforming MSF's approach to community-led initiatives

Empowering community-based organisations (CBOs) through capacity-building for continued access to healthcare services.







Introduction

- Initiated "New Ways of Working with Community Organisations" through the Transformational Investment Capacity (TIC) – investment hub focused on bringing new ideas to change how we meet the evolving needs of our patients and work better with patients and communities
- Working with grassroots community-based organisations focusing on capacitybuilding and empowerment to mitigate the impact of project closures on vulnerable and excluded populations
- This approach values the community's input, identifying community
 organisations as active participants in identifying priority health problems and
 solutions, engaging in service delivery and advocating for more effective
 responses.







Community-Based Organisations Engaged

Malawi – 2 CBOs focused on access to HIV and SGBV services for sex workers

South Africa – 3 CBOs focusing on SGBV services

Zimbabwe – 4 CBOs focused on SRH and 1 CBO on PWUDs

Mozambique – 1 CBO
working on access to HIV
services for LGBTQ+
community and sex workers

Kenya – 2 CBOs implementing differentiated service delivery (DSD) for NCDs and 1 CBO focused on access to medically assisted treatment (MAT) for PWUDs







Two-Fold Capacity-Building Approach

Organisational Capacity Building

Facilitating the development of key organisational and governance components which are necessary for the day-to-day functioning of the organisation:

- 1. Governance
- 2. Human Resources
- 3. Administration
- 4. Financial Management
- 5. Project Management
- 6. Technical Skills
- 7. Networking and Advocacy
- 8. Community Approaches

Implementation of Activities

Supporting the CBO to begin implementing key functional activities:

- 1. Referrals
- 2. Awareness Raising
- 3. Community Mobilization
- 4. Adherence Activities
- 5. Peer-to-Peer Counselling and Support
- 6. Community lay health service delivery (eg Distribution of Condoms/ Pre-exposure Prophylaxis (PEP)/ Post-exposure Prophylaxis (PrEP, pregnancy testing, counselling services etc)
- 7. Health Promotion Sessions







Capacity-Building Process









Capacity-Building Outcomes from Malawi

SWs are accessing PreP, PEP, emergency contraceptives, and HIV oral self-tests in proximity (within the community)

SWs access first-line psychological trauma support with referral pathways to the Ministry of Health and law enforcement agencies

Implementation of peer-to-peer counselling sessions

Adolescent SWs access services ranging from HIV testing and counselling, family planning, STI management, mental health, and SGBV PFA through the Teen Clinic

Health education sessions conducted at hotspots

Advocacy initiatives: Collaboration with Social Welfare to get minors out of sex work







Capacity-Building Outcomes from Kenya

11 satellite community revolving pharmacies (CRPs) established at MoH facilities in communities closer to patients, in two counties

A total of 9000 patients registered between all the CRPs (these patients are collecting their NCD drugs from the CRPs)

18 peer-led support groups were developed within the communities between the two counties to support adherence to drugs

CRPs are monitoring drug stockouts at MoH facilities, which supports advocacy initiatives







Lessons Learnt



Once capacitated CBOs can implement community-led solutions which is evident in the context-based programmes that they have implemented



Contextual sensitivity is key when engaging CBOs



Strengthened CBOs support project handover and sustainability of activities



Building CBO capacity is a slow process which requires time for CBOs to adapt to new skills



Integration of CE at the beginning of the project life cycle.







Recommendations



Essential to maintain ongoing consultations and discussions with CBOs to constantly keep determining organisational capacity building needs



Strengthening reporting tools will be crucial for funding applications



The peer-led model is a key strength of the CBOs, important to encourage the use of such an approach



Encouraging increased networking and collaboration for the CBOs for them to share and access information and resources, and create inter-organisational referral pathways







Thank you!

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CBO with inventory of HIV testing kits in Malawi (D. Zhou, 2022)





