

# Community Engagement and Advocacy

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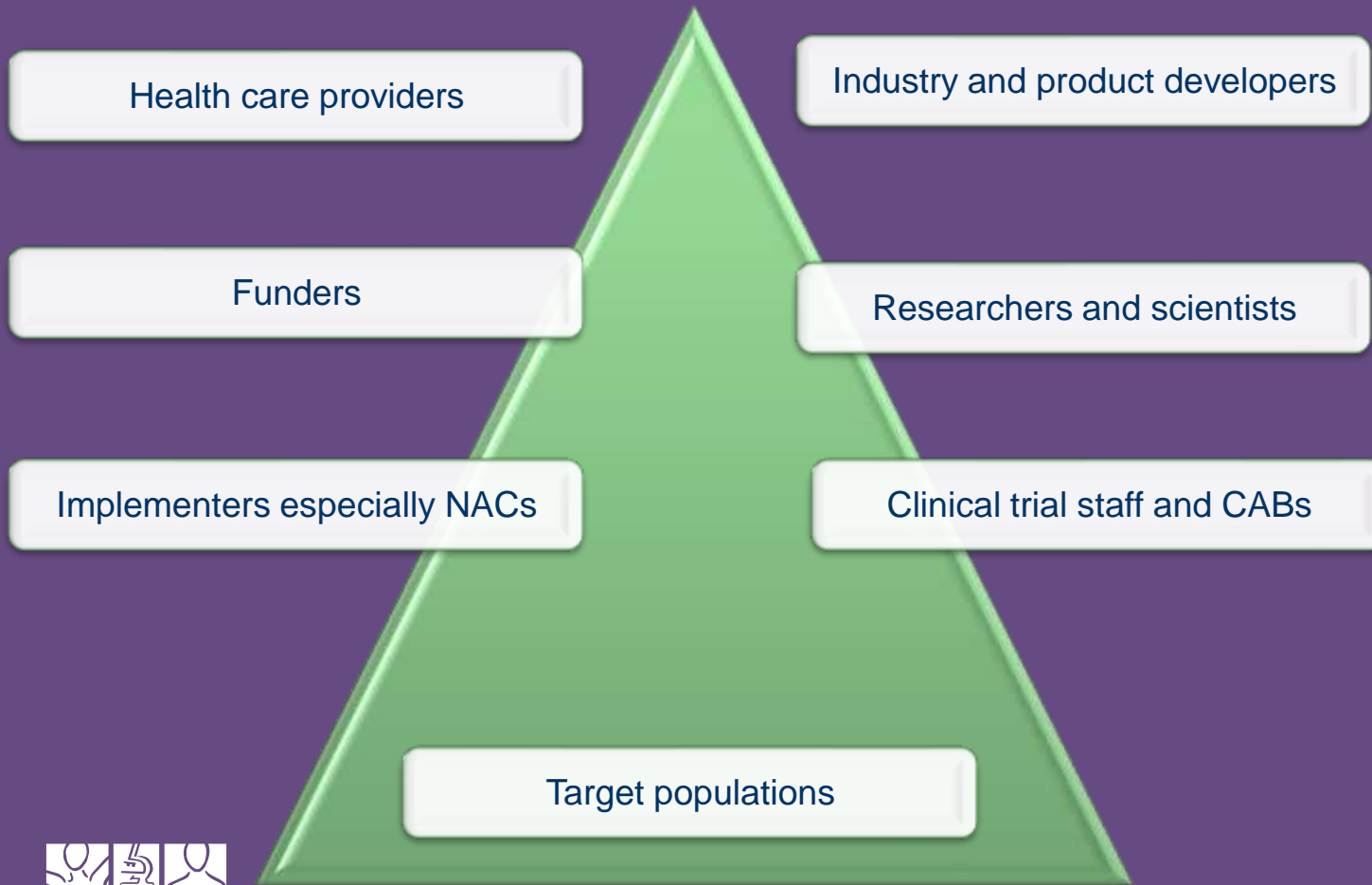
*Expanding HIV prevention options, especially for women*

# Presentation outline

- Defining community
- When to involve community
- Various models for community engagement
- Involving networks of PLHIV



# Who is the community?



# When to involve community

- For new prevention technologies , who to involve and when depends on your advocacy message



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# ..... a shifting agenda

## Loci for microbicide advocacy in the past decade

1. Supporting the idea that a microbicide could work
2. Financing for research on microbicides
3. Ethical development of the much needed product
4. Thinking about access for NPTs- regulators perspectives matter most as we dream of licensure
5. Regional perspectives matter during and after the trial
6. Advocacy for financing introduction and WHO is on the fore

# Facets of community engagement



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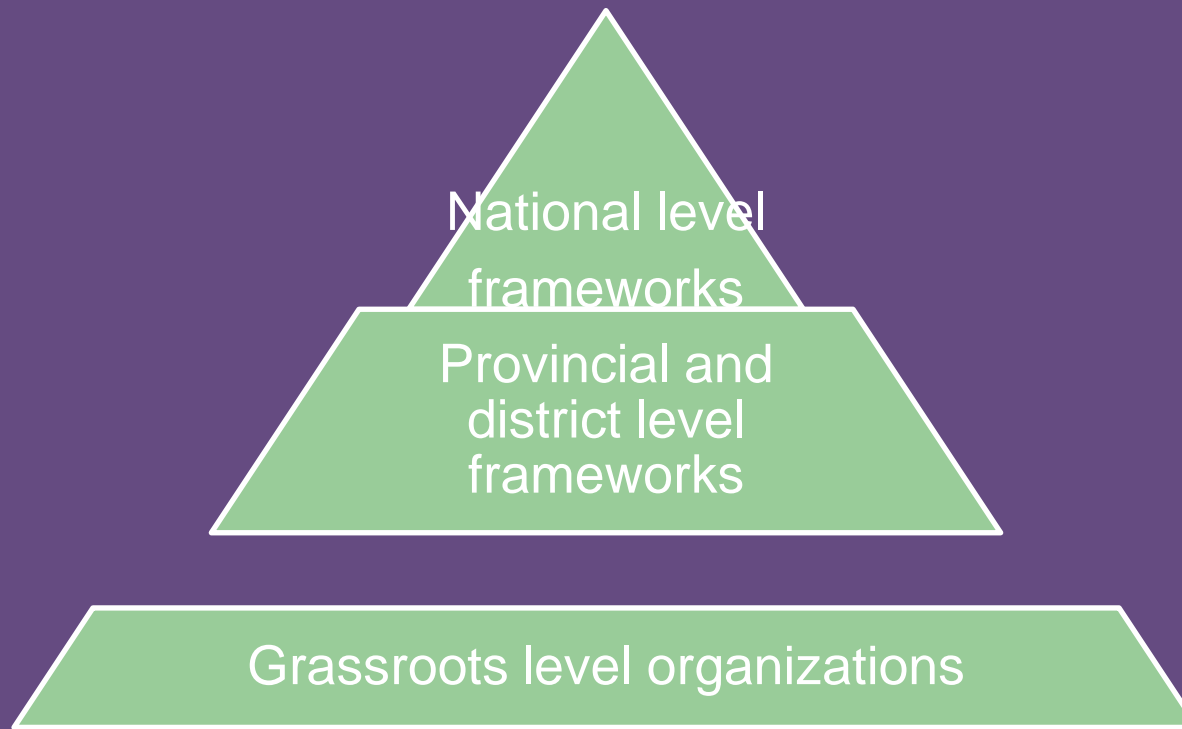
# 1. Learning end user perspectives

- Perspective in effective advocacy strategies ...does it apply to products fulfilling a public health
  - Determines what kind of product ; and its augmentation;
- Who else should we be talking to ?
  - Funders
  - Scientists( both academic and product developers
  - Regulators
  - Governments

And when do we start including the conversation with all these stakeholders?



## 2. In the Policy Agenda





# .....Policy agenda

## Technical assistance where needed

- HIV vaccine prevention plans- examples from AAVP IAVI and AVAC.
- Technical input into draft policies engaging parliamentarians and forums such as NEPAD to identify champions for microbicides.
- IAVI and GCM working with the champions for HIV prevention and GAF including the microbicide language in the SA NSP.
- Universal access AU statement and NPTs



# 3. Supporting the research process

Community engagement has been a recognized phenomenon over the years. Why?

- Need more support for research
- Demand creation from communities
- Broader prevention dialogue

Understanding communities is essential in driving a relevant research agenda



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## 4. During the research process

- Updating communities on key research process issues, results and implications ( **MMCI and COP projects at GCM**)
- Creating platforms for dialogue that will enrich the research process CAB members
- Closing the feedback loop from the community



# 5. Dialogue on access



- **About consolidation**
- **Experiences from the past- RH, female condom**
- **What works in this community**



# 6. Demand creation: The process (AIDA model)

- **Attention:** Identifying an underserved market segment; and through the process of involving them in research , they are aware that there is a product that is coming up.
- **Interest:** By making communities interested in identifying and solving their own problems around HIV , they will see probiotics as part of the solution “ *not for us without us*”.



# Demand creation: AIDA model

- **Desire:** Managing expectations important as communities start demanding a product .
- **Action :** need assured supply through manufacturing capability , provider logistics and end user reality consideration



# Challenge..... product doesn't exist yet!

- Service delivery priorities
- Urge for “visible action” like advocacy for existing options sounds more appealing
- Priority setting
- Capacity strengthening needs for the organizations



Contextual issues cant be ignored...

# What do women say? Does it matter

*At the rate infections are occurring, anything above 30% will do for me.*

27 Year old female in a community training in Durban, November 2009

*Hata wewe huwezi taka bidhaa ambayo imeanguka mtihani, imepata chini ya 50% (Even you would not like a product that has failed the exam). The woman equated efficacy to school exams whose pass mark is 50%.*

30 year old in a film screening session in Nairobi, December, 2008

*I would like the microbicide to be at least 60% effective. Even male circumcision which is being offered to men is 60% effective.*

Female participant, training on new woman-initiated prevention options, Kisumu, May 2009



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# Funds and leadership needed



# Women leaders needed

*Anything about us, without us, is not for us!*



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# Conclusion

Why are you in this field....always remember

- We need to be working together with networks of PLHIV to make this work...
- Resources are not infinite but through creative thinking and effective stakeholder engagement we can increase the size of the pie



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# Vienna...Save the Date

Satellite to discuss CAPRISA Results **Using Antiretrovirals to Prevent HIV: Implications of the outcome of the CAPRISA 004 tenofovir-gel microbicide trial**

**DATE: Tuesday, 20 July 2010, 6.30pm-8.30pm**

An official satellite of XVII International AIDS Conference,  
Vienna, Austria, Messe Wien Exhibition & Congress Center -  
Mini Room 10

**(Please note: a boxed meal will be served from 6:15pm for delegates attending the satellite)**



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# Thank you

Dr. Samu Dube



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*Expanding HIV prevention options, especially for women*

**Global Campaign for Microbicides**

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