Stop TB Afghanistan: successfully developing a local fund raising strategy

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Afghanistan National Partnership to Stop TB

• A nationally registered, representative body constituted in 2008
• It aims to ensure equal & active participation of public & private health sectors, civil society (patients, NGOs, INGOS, religious groups), multilateral and bilateral development agencies, organizations
• It has been mandated to expand TB care and address marginalized populations through innovative resource mobilization and care delivery solutions
What are the activities of partnership?

1. inclusiveness & ownership
   - all sectors involved in TB care are part of the national partnership

2. setting strategic priorities and guiding distribution of resources
   - National partnership mobilizes donors to support TB care

3. promotion of patients activism
   - Creation of patients groups at national & sub national levels
What are the activities of partnership?

4. addressing vulnerable populations (women)
   – More women than men affected by TB in Afghanistan

5. financial & social support campaigns
   – Innovations like Ramadan zakat donation campaign

6. creation of sub national partnerships that address local needs
   – In Kandhar, Herat, Mazar I Sharif
Fund raising by National Partnership

• Three pronged strategy for fund raising
  1. Sustaining support of traditional donors
  2. Actively pursuing & strengthening local resources (money and material) and
  3. Finding new donors
Sustaining support of traditional donors

- Developing long term relationships with bilateral donors due to unique environment of country e.g. USAID, CIDA, Italian Cooperation, JICA
- Understanding donor priorities and developing linkages (CIDA in Kandhar, Italian Coop. in Heart...)
- Offering complementarities (Herat reference laboratory developed by Italian Coop., run with Global Fund resources)
- Proactively engaging, sustaining relationships (timely reporting, conducting advocacy for donors at different forums, developing products (e.g. CIDA booklet & video)
- Advocacy for Global Fund resources (e.g. resolution of Global Fund disbursement delay, an effort of partnership through advocacy and networking)
Actively pursuing and strengthening local resources

• Yearly “Ramadan zakat” campaign
  – Donations are collected in money, food and other material forms
  – Partnership Board members contribute themselves first
  – WHO TB staff salary announcement as contribution

• Tapping business sector through philanthropy appeal (e.g. Chamber of commerce)

• Sub national partnerships (e.g. Herat partnership chair is a business who contributed himself and encouraged others)
Finding new donors

• Linkages have been developed with Foreign missions and embassies (e.g. NTP/Partnership joint visits)
• French Initiative approached through Global Fund Board member
• Offering visibility opportunity to anyone interested in supporting TB (e.g. genital TB ward has been refurbished by a pharmaceutical company in KBL)
• Offering value for money (e.g. “real, deserving”, patients to get food from World Food Program-food support for every TB patient has been secured
Way forward

- Continuously working with traditional donors and offering value for money, demonstrating contribution of their investment (e.g. recent review mission)
- Strengthening NTP technical assistance from WHO to write quality proposals (e.g. TBREACH, Global Fund, CIDA, Italian Coop.)
- Promoting strategic thinking and optimal use of available resources through TB Task Force to avoid activity duplication
- Promoting synergies with other health programs e.g. Children Hospital in Herat being used for TB and training of health work force in general
Glimpses of Partnership activities

- Inclusiveness & ownership
• Promoting patients & affected community activism
• Addressing vulnerable populations (women)
• Financial & social support