

End of Project Report

Organisation name: ANGLICAN AIDS & HEALTHCARE TRUST

Project Name: SIYAKHA *"We are building."* (1/2)

Project period covered by this report: January 2007 to November 2008

Project Summary:

The Anglican Church, through the Siyakha programme is committed to mobilising and building upon its existing and potential capacity (human and networks) in partnership with other role players to make a visibly compassionate and effective contribution as a faith-based organisation (FBO) to the prevention and impact of the HIV and AIDS pandemic in Southern Africa.

Siyakha has supported and expanded the projects initiated in Dioceses, in the following ways:

- Strengthened the understanding among church and community leaders of HIV and AIDS, with a focus on the reduction of stigma and marginalisation; 32 533 people were reached through workshops and other gatherings such as church services.
- Making VCT (voluntary counselling and testing) services available through churches in areas where government services are inadequate or inaccessible; there are 65 church sites across the diocese of Christ the King, George, Johannesburg, Matlosane and Swaziland. A total of 69 795 people were tested of which 14 111 was tested through the mobile New Start franchise in the Diocese of Free State and 16 146 through the mobile New Start franchise in the Diocese of Grahamstown.
- Setting up and facilitating support groups for people living with HIV or AIDS, and providing training in wellness management; A total of 190 support groups has reached 16 848 people.
- Caring for the sick in their homes and supporting their families through home base care volunteers (HBC); Services such as psychosocial care, home visits, clinic links and spiritual care, reached 2 195 198 people. There were 2885 individuals trained as home based care workers.
- Providing holistic care for orphaned and vulnerable children, and developing models of child care that can be replicated; 63 313 children were reached through services such as short term residential care, foster care placements, child advocacy, back to school services (uniforms, stationary), after school care, accessing government grants and birth certificates, ARV treatment support, food parcels, and establishing vegetable gardens.
- Strengthening the capacity for advocacy within the Anglican Church and communities where churches are; Advocacy through church services; Candlelight Memorial Day, Orphan day, and World Aids day and supporting organisations are supported by various partners. This has proven that when partners and organisations join forces, a greater impact is made. The production of a documentary on the work of HIV in diocese is a tool that is widely circulated and provides information on efforts on community level.
- Developing counselling skills amongst church and community members in partnership with other organisations such as Life Line and Child Line are ongoing.
- Strengthening project implementation, management, monitoring and evaluation systems within the dioceses; (This was only achieved partially due to the uncertainty of the

- Fostering effective collaboration between the Anglican Church of Southern Africa (ACSA) and other churches, faith-based organisations, NGO's, government departments and community groups; (Hospice Palliative Care SA, New Start, NACOSA, SANAC, EHAIA, Local Department of Health, Social services and Municipalities and CAPA.)
- Developing and distributing liturgies, posters and information leaflets to support and publicise the services offered by the diocesan Aids ministries and other organisations.

Project Outcomes:

Objective	Outputs against objective
<p>1. To build and strengthen the capacity of the dioceses to compassionately and effectively respond to the HIV/AIDS pandemic.</p>	<ul style="list-style-type: none"> • Plan, evaluate and document the impact of skills training based on the findings from assessments. There is a greater need for training in fundraising skill, strategic planning and project management. • Provided Support Grant for HIV/AIDS coordinators salaries and operational costs. • Collated and reviewed the narrative and financial reports from the 24 dioceses. • Reviewed and provide 19 project grants to support HIV/AIDS activities ranging from OVC, VCT, Peer Education, Care & Support, and Education & Training. • Provided financial assistance for 6 cluster meetings to facilitate discussions, linkages on HIV and AIDS. Clusters shared information regarding their • Provided support and care to the caregivers across dioceses. • Planned and facilitated financial and programme management in dioceses to enhance sustainability. • Planned and facilitated change management to enhance sustainability.
<p>2. To strengthen ACSA to be a knowledge resource for 26 sub-grantees in HIV/AIDS care.</p>	<ul style="list-style-type: none"> • Planned and facilitated regional and local conferences and meetings for coordinators, care givers and task teams. • Provided briefings, reports and updates on HIV/AIDS to Archbishop and/or the Liaison Bishop. • Monitored and disseminated HIV/AIDS, new and related upcoming events. • Verified and updated data around HIV/AIDS on the AAHT website. • Provided training and support to dioceses where needed.
<p>3. To strengthen advocacy and build regional and</p>	<ul style="list-style-type: none"> • Attended, participated and exhibited the work of ACSA and 24 dioceses at the XVII

<p>international partnerships in response to the HIV/AIDS pandemic.</p>	<ul style="list-style-type: none"> • Captured stories, video footage and photographs of the Siyakha Diocesan projects for dissemination to ACSA partners and alliances. (4 x DVD discs attached to couriered copy of report). • Promoted and established partnerships on HIV/AIDS programme areas with other ACSA organisations, local and Regional communities and international organisations. (Hospice Palliative Care SA, New Start, NACOSA, SANAC, EHAIA, Local Department of Health, Social services and Municipalities, Link Dioceses and CAPA.) • Provided travel cost to promote local/regional partnerships. • Disseminated HIV/AIDS materials and liturgies, sermons and prayers to 24 dioceses and parishes through the Resource centre. • Conduct stigma reduction training and workshops in dioceses mainly through clergy schools.
<p>4. To improve capacity of Siyakha and AAHT office to effectively and efficiently manage programme.</p>	<ul style="list-style-type: none"> • Planned and conducted financial audit 2007/8 financial year. Audit report attached. • Facilitate joint planning of programme plans and activities within AAHT. • Regular monthly management committee (MANCOM) meetings held to share on programme activities between AAHT programmes. • Developed a partial M&E system for the Siyakha programme. Attached to report. • Provided financial support to Siyakha programme staff. • Provide financial support for the Episcopal oversight – supporting the work and travel of the Liaison Bishop. • Provided technical advice on HIV/AIDS training. • Provided continuous professional training for programme.
<p>Lessons Learned:</p> <p>Visits to projects by diocesan AIDS team members in all dioceses revealed that closer project monitoring was needed within the dioceses. More monitoring and feedback was also needed from the AAHT head office.</p>	

The way in which the HIV and AIDS ministry has been implemented to date highlighted the different kinds of diocesan structures involved in programme delivery. It was also noted that three important building blocks guide successful implementation of the programme: a growing and thorough understanding of the internal institutional terrain; a good understanding of existing and potential role players and partners in each country, diocese and province where Siyakha operates; and finding and using emerging opportunities within AAHT, as an institution to profile, present and promote the goals, objectives and outcomes of the programme.

The capacity of general diocesan staff, especially the Administrator and Bishop is critical to the success of any AAHT programme coordinated at diocesan level. Building capacity in-house as well as at diocesan level is a critical aspect and core focus of the Siyakha programme. The diocesan coordinators provide the human capital/asset base for the successful implementation of this and other AAHT programmes and they are faced by huge challenges as their current and projected roles and responsibilities increase.

Advocacy and partnerships were strengthened through various activities such as Candlelight memorial day, Orphan day, Condom week and World Aids day. The importance for dioceses to focus on these events in collaboration with other partners such as TAC, NACOSA and Government departments continues to be paramount. The sharing of video footage of various programmes in the dioceses including the documentary "THE CHALLENGE" is a key resource that shares the reach of the HIV & AIDS ministry of the Anglican AIDS & Healthcare Trust and strengthens advocacy.

Best practices have been identified in areas of prevention, advocacy, VCT, OVC and Income generation (vegetable gardens). These have not been documented but have been identified for documentation at a later stage.

In your opinion how has this project improved South Africa's response to HIV and AIDS?

The Siyakha Programme covers 24 dioceses in the Anglican Church of Southern Africa across six countries of which 19 of these Dioceses are in South Africa. The programme seeks to reduce stigma and discrimination through care and impact mitigation and to reduce HIV transmission. Areas of focus included prevention, capacity building, home based care, care for orphaned and vulnerable children; income generation and voluntary counselling and testing and spiritual care. All these projects were initiated and implemented at community level by diocese and are supported by the Anglican AIDS and Healthcare Trust.

The Anglican Church with its extensive grassroots level networks, continues to be anchored in many local communities and reaching the furthest remote rural communities. The Church has always been the carer of the poor and marginalized and continues to influence attitudes and values, mobilizing its members, and strengthening existing partnerships with government, NGO's, CBO's and other faith groups to effectively disseminate information and to advocate on behalf of poor and vulnerable people.

Through vital services such as care, support and education to people living and affected by HIV and AIDS across Southern Africa the Church serve people in a practical way.

The Anglican Church has impacted against the fight of HIV and AIDS in many local communities

through its visibility and being an active player, advocate and partner in the response to the pandemic. This is particularly evident in South Africa where 19 of the 26 Dioceses are situated.