

Business Coalitions Tackling AIDS



A Worldwide Review January 2008

World Economic Forum
Global Health Initiative
in cooperation with



Principal Author: Inderjit K.Sidhu

The Global Health Initiative of the World Economic Forum has enjoyed a six year partnership with the World Bank and UNAIDS to increase and improve the engagement of the private sector in tackling HIV and AIDS in a scalable and sustainable manner. Together we are proud to present this report on Business Coalitions tackling AIDS worldwide.

One of the most successful strategies employed by our country counterparts to forge closer relationships between the public and private sector has been to develop and support coalitions of businesses to address the many challenges of HIV and AIDS in societies and communities, particularly at the workplace.

This report reviews and analyses the current status of four regional and 47 national Business Coalitions that are in various stages of development around the world today. It also introduces 10 coalitions planned for launch in 2008-2009.

In addition to our partners, we would like to thank the following organizations for their contributions to this report:

- Caroline Hope from the Corporate Council on Africa (CCA) who provided invaluable feedback on the draft.
- Frank Poen from PharmAccess Foundation.
- Susan Leather from the International Labour Organization.
- Four regional Business Coalitions: Stephen Grant and Amanda Allen-Toland from the Asia-Pacific Business Coalition on AIDS (APBCA), Brad Mears and Peter van Wyk from the Pan-Africa Business Coalition (PABC), Pierre-Etienne Vannier of the AIDS Business Coalition in the Arab Region (ABCAR), and Carol Ayoung and Naika Pichi of the Pan-Caribbean Business Coalition on AIDS (PCBC) who have generously given their time and effort to provide the information that is central to the analyses in this report.
- The 47 national Business Coalitions around the world as individually named in the world directory at the back of this report.

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We are pleased to release this first report, *Business Coalitions Tackling AIDS: A Worldwide Review*, written by the Global Health Initiative (GHI) of the World Economic Forum.

The goal of the GHI is to facilitate and stimulate greater business engagement in health systems and in the fight against HIV and AIDS, tuberculosis (TB) and malaria. To achieve this goal, the GHI works closely with the World Economic Forum's member companies, as well as with UNAIDS; the Global Fund to Fight AIDS, TB and Malaria; and, the Stop TB and Roll Back Malaria partnerships.

The GHI partnered with the World Bank's AIDS Campaign Team for Africa (ACTAfrica) and UNAIDS six years ago to expand the engagement of businesses tackling HIV and AIDS by launching Business Coalitions to help fight HIV and AIDS. The partnership has gone from strength to strength, as reflected in the considerable number of Business Coalitions that exist worldwide today.

Because of the rapid proliferation of such Business Coalitions in recent years, it is now time for a global review of their activities. In November 2007, the GHI for the first time brought together the heads of Business Coalitions from four regions to share information, discuss common regional challenges and investigate opportunities for working together in the future.

This new publication builds on these discussions and last year's *The State of Business Coalitions in Sub-Saharan Africa* report, launched in collaboration with the World Bank, UNAIDS, Deutsche Gesellschaft für

Technische Zusammenarbeit (GTZ), the Corporate Council on Africa (CCA) and the PharmAccess Foundation. The report concerning sub-Saharan Africa took the first step in capturing the state of the 20-plus Business Coalitions in sub-Saharan Africa.

We hope that the information provided by this new report will be useful to a wide range of stakeholders engaged in public health, including existing Business Coalitions, coalitions still in development, individual corporate members of coalitions, and national AIDS coordinating bodies. It is a resource designed to help them set priorities and plan next steps.

We would like to thank Accenture for the special contribution made by its secondee to the GHI, Inderjit K. Sidhu, who led and managed this worldwide mapping and evaluation exercise with exceptional drive and dedication. We would also like to express our appreciation to Elizabeth Ashbourne from the World Bank, Regina Castillo and Marie Engel from UNAIDS and Elisabeth Girrback from GTZ for their support in making this programme a reality. Finally, we gratefully acknowledge the active participation and contribution of Business Coalitions worldwide for their commitment to this effort.

The GHI provides a unique platform for dialogue, partnership and action on HIV and AIDS, tuberculosis, malaria and healthcare systems involving both the private and the public sector. It coordinates a community of more than 230 companies that are confronting similar fundamental health challenges to their operations. In particular, the GHI provides a forum to share experiences, to define generally accepted standards and to act as an advocate for the private sector. For further information please refer to <http://www.weforum.org/globalhealth>.

We hope this report will further increase and boost the engagement of businesses in the fight against HIV and AIDS.

A handwritten signature in black ink, appearing to read 'R. Samans', with a horizontal line underneath.

Richard Samans
Managing Director
World Economic Forum



Stephen Grant
Chief Executive Officer
Asia-Pacific Business Coalition on AIDS (APBCA)

The social and economic challenges that HIV and AIDS present the global community are stark and well documented. In the Asia-Pacific region alone it is estimated that 8.6 million people are living with HIV, and in 2006 approximately 630,000 people died from AIDS-related illnesses¹. The International Labour Organization estimates that by 2010 approximately 850,000 people throughout Asia will be unable to work due to AIDS-related illnesses. Annual financial losses associated with the disease are estimated to rise from US\$ 7.3 billion in 2001 to US\$ 17.5 billion by 2010.

Clearly this is not a challenge that governments and community organizations can face alone. The private sector is well placed to contribute skills and resources and play a pivotal role in finding solutions.

The Asia-Pacific Business Coalition on AIDS (APBCA) was launched by former US President William Clinton in February 2006 together with 20 private sector companies. APBCA supports the establishment and coordination of country-level Business Coalitions throughout the Asia-Pacific region. The APBCA network of Business Coalitions collaborates to assist companies manage the impact of the HIV epidemic on their business and the communities in which they operate.

APBCA contributes expertise and support to establish the Business Coalition infrastructure, which provides services to companies responding to HIV and AIDS. The Papua New Guinea Business Coalition Against HIV and AIDS (PNG BAHA), launched in January 2007, is the first new Business Coalition established with APBCA support. Since its launch, PNG BAHA

has rapidly raised the profile of HIV workplace issues and is providing much needed services to the country's private sector.

On World AIDS Day 2007, APBCA expanded its network to welcome the launch of the Indonesian Business Coalition on AIDS. The APBCA network is harnessing current knowledge, experience and best practice in tackling HIV. Programmes implemented in the region have been evaluated to develop highly effective tools. These tools and programmes are standardized and shared with Business Coalitions to assist them to deliver quality and well-targeted HIV interventions.

APBCA ensures rigour in the development of approaches towards HIV and collaborates with our network of Business Coalitions to tailor these for individual companies based on their level of resources and their core competencies. Workplace HIV interventions are relatively inexpensive, with the cost of prevention proving to be less than the costs associated with lost productivity due to illness.

We are pleased to see the Global Health Initiative of the World Economic Forum take the lead in raising global awareness of Business Coalitions and providing an overview of their role at the regional and national level. We believe this report will enable increased dialogue among the Business Coalitions to develop more sophisticated and common approaches to tackling HIV/AIDS and building the business coalition against AIDS movement globally. Enhanced communication and information sharing between Business Coalitions can only assist us to deliver consistent, quality programmes that achieve results worldwide.

Stephen Grant

A handwritten signature in black ink, appearing to read 'Stephen Grant'.

¹ <http://www.apbca.com/problem/asia/>



Alex Govender
Manager, Corporate Health and Safety
Volkswagen South Africa



With 1,500 infections per day, 850 deaths per day and with most of those dying in the economically active age group of 20-50, and a relatively late national response, it is little wonder that business had to come up with innovative solutions to mitigate the disastrous effects of HIV in South Africa.

It is against this backdrop that the Board of Management of Volkswagen of South Africa (VWSA) decided to implement a comprehensive workplace HIV and AIDS programme as a strategic company project. This project was fully supported by the union at its inception. Critical to the success of any workplace intervention is the total commitment and support of these two parties.

Together with technical assistance from the Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ), a Task Team comprising all the relevant stakeholders was formed. Its first order of business was to develop a workplace policy in collaboration with the union, which formed part of the Task Team. Integral to the policy was the stated affirmation that there would be no discrimination against any employee purely on the basis of a positive HIV status and that disciplinary action would be taken against any employee who, after being informed by the affected employee of a positive status, discloses such status to any other person without the employee's consent. Further, no employee would be coerced into undergoing an HIV test for employment purposes and that should the prospective employee declare a positive status, it would not exclude the employee from employment.

Six years on and with a prevalence of 6%, the workplace programme continues in its intensity to assist our employees. VCT is offered every day to employees at the medical facility. This intervention has helped

reduce the number of deaths as a result of AIDS, and the impact on absenteeism is being minimized.

Together with the International Labour Organization (ILO) and the national Department of Labour, VWSA has embarked on a pilot project that entails working with our suppliers. The approach for this project reflects a new form of private sector response to HIV/AIDS that is emerging – HIV/AIDS workplace programmes targeted to companies that form the supply chains of multinational corporations. VWSA formed a partnership with South African Business Coalition on HIV/AIDS (SABCOHA), which then became the delivery agent for the implementation and coordination of the project at the level of SMEs.

The private sector cannot hope to achieve such projects without the assistance of other important players. Hence, our association with SABCOHA, which is well placed and well informed to handle such interventions. Together with their experience that of other local private sector companies we can share resources and assist smaller companies with well established expertise and proven implementation methodology.

Volkswagen AG, a global player and a member of the Global Compact, has a very strong interest in a highly effective labour protection system at the workplace to ensure competitiveness, economic performance and social values. VW has always set the highest standards for their employees, implemented ILO standards and, in June 2002, signed the Social Charter with a code for social rights and industrial relations.

It would be foolhardy to assume that we can go it alone and fight the epidemic all by ourselves. A well coordinated response through national coalitions and coalitions across the globe can only help the private sector in fine-tuning our responses and delivering a cohesive and effective solution together with government. We believe this report is a major step forward in raising awareness and providing guidance to the private sector about the world of Business Coalitions and how they can help us tackle HIV/AIDS at the workplace.

Alex Govender



Peter Piot
Executive Director
UNAIDS

Over the past quarter-century, AIDS has emerged as one of the defining issues of our time. It is an exceptional challenge that can only be addressed by a long-term, multi-sectoral response.

Unlike other health crises, HIV largely strikes people in their productive and reproductive prime. Nine out of 10 people living with HIV are young adults; the global labour force has already lost 28 million people to AIDS.

The global business community has a critical role to play in the response to AIDS. National Business Coalitions are well placed to advocate for corporate action on HIV prevention, treatment, care and support, as well as to encourage companies to adopt HIV in their workplace programmes. They have the potential to facilitate a coordinated business response and to establish mechanisms to share good practices among businesses.

This report is the first-ever study of its kind at the global level. It raises the profile of Business Coalitions around the world; demonstrates their pivotal role in the AIDS response; describes best practices, benefits, and achievements; and, highlights some of the key challenges facing national and regional coalitions.

The UNAIDS Secretariat is proudly working with more than 30 national Business Coalitions to strengthen the private sector response at country level. UNAIDS provides technical oversight, advocacy advice and strategic financial support.

The recent growth in the number of Business Coalitions worldwide is due to no small degree to the commitment of UNAIDS and other stakeholders to fostering a stronger engagement of the private sector in the AIDS response. Nevertheless, Business Coalitions have never been in greater need of support to ensure their long-term financial sustainability, meet members' demands and engage small and medium enterprises.

I trust this report will generate wider awareness and greater knowledge about the role played by Business Coalitions in tackling AIDS worldwide. I hope it will also encourage other companies to join coalitions or create the impetus to establish coalitions where these do not yet exist.

Finally, I congratulate the Global Health Initiative of the World Economic Forum for leading and coordinating this research on such a timely and important issue.

Peter Piot



Mark Foster
Group Chief Executive
Management Consulting & Integrated Markets
Accenture

I am delighted to share with you the first world report developed by the Global Health Initiative of the World Economic Forum, *Business Coalitions Tackling AIDS: A Worldwide Review*.

AIDS is now widely recognized as a clear threat to business. Indeed, 46% of firms worldwide expect the epidemic to impact their operations in the next five years². A sense of purpose and urgency is critically important. Companies need to take action now to address this issue as part of their overall approach to retaining talent, managing business risks and ensuring good corporate global citizenship.

As businesses strive for excellence in local markets and seek to expand or source business operations in new national and international markets, they rely on their workforce to help deliver this vision. As a result, the need for companies to look after the well being of their employees and of the communities in which they operate in has become ever more pressing.

At Accenture, we have long recognized that our people are one of our greatest assets. Our approach to global corporate citizenship goes beyond corporate philanthropy to building sustainable, mutually beneficial partnerships to ensure the long-term well being of our people. In conversations with business, government and industry leaders worldwide, we continue to encourage and support this same view.

Business Coalitions tackling AIDS have emerged as an ideal platform for multinational, national and local businesses to come together to jointly address the epidemic. Through collaborations with key stakeholders operating within the same cultural, social

and political environment, Business Coalitions tackling AIDS have become an indispensable platform for action by the business community. Today, there are at least 47 national Business Coalitions tackling AIDS around the world. Collectively, they are reaching over one million organizations with HIV and AIDS workplace programmes.

Should the idea of Business Coalitions tackling AIDS be new to you, I hope this report will help shed some light on what they are, how they operate, and what activities and services they provide to the private sector. I believe this report will strengthen the position of Business Coalitions as mechanisms for businesses to work through to address AIDS in the workplace.

Accenture's partnership with the Global Health Initiative enables us to provide our employees with possibilities to gain additional professional experience in business and public health issues, as well as to contribute towards improving the health of the global workforce through our joint projects. This report is just one example of our efforts. We look forward to continuing to make an impact on global health through our thriving partnership with the Global Health Initiative.

Mark Foster

² *Annual Global Business Survey*, Global Health Initiative, World Economic Forum, Survey 2005-2006, 10,993 firms in 117 countries.

About This Report

This report aims to provide a snapshot of the state of four regional and 47 national Business Coalitions established around the world to tackle AIDS³. As you read this report, more coalitions will have emerged to meet the growing demands of the private sector, which is playing an increasingly important role in tackling AIDS and other infectious diseases by complementing the work of both the public sector and civil society. With such a rapid increase in the number of Business Coalitions launched in recent years, the time is optimal for a global review.

This is the first report that both maps and evaluates Business Coalitions from around the world tackling AIDS. It serves as a point of reference for existing and newly emerging coalitions – both at a national and regional level. This report also highlights the value and potential of Business Coalitions to institutions that are not familiar with the work of these organizations, but are interested in responding to the threat AIDS poses to business.

In some countries, Business Coalitions form an integral part of the national AIDS coordinating frameworks, such as in Botswana. However, in every country they operate within the local economic, social, cultural and political environment. The key to ensuring the continued success of Business Coalitions in tackling AIDS is raising awareness and sharing best practices. It is also key that Business Coalitions be supported in developing strategic and technical relationships and partnerships that will strengthen all players and build more momentum towards achieving common goals.

This report aims to:

- Raise the profile of Business Coalitions around the world and create awareness of the positive contributions they are making towards tackling AIDS
- Provide a status quo of Business Coalitions worldwide – what coalitions exist at the national and regional levels and what activities and services they provide
- Highlight the objectives and services of regional Business Coalitions so they can best support and work with national coalitions
- Highlight national Business Coalitions currently in the pipeline for launch in 2008-2009

- Demonstrate the role of Business Coalitions within the multi-sectoral response to AIDS and the key relationships and partnerships they leverage to achieve their goals
- Facilitate learning among Business Coalitions by sharing best practices and success stories, while at the same time providing valuable insight for new or yet-to-be launched coalitions on various structures, funding models and services offered
- Offer lessons learned based on former, relaunched and emerging coalitions
- Highlight Business Coalitions as an accessible and successful channel for the private sector and other stakeholders interested in working in specific regions and countries to tackle AIDS in the workplace
- Identify specific areas where coalitions need support so that donors, academia and international partners can focus their effort in these areas to achieve maximum impact

Mapping and evaluation exercise

Despite the important work of Business Coalitions in addressing AIDS and the efforts of public and private sector and civil society groups supporting these organizations, no global overview of their work has been undertaken to date. Such an overview will allow all stakeholders to determine a common baseline from which to set priorities and define next steps to further work with and strengthen Business Coalitions.

The first steps towards achieving a better understanding of the impact of Business Coalitions in tackling AIDS was undertaken last year by the World Economic Forum in partnership with the World Bank. This effort involved mapping and evaluating 20-plus Business Coalitions across sub-Saharan Africa, which resulted in a report, *The State of Business Coalitions in sub-Saharan Africa*. This report can be downloaded from the GHI website together with all the individual country profiles using the following link: <http://www.weforum.org/globalhealth>. This effort was achieved in cooperation with UNAIDS, Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ), the Corporate Council on Africa and the PharmAccess Foundation.

³ AIDS in this report can also refer to HIV-positive persons.



Identification of Business Coalitions tackling AIDS

For the global report, Business Coalitions tackling AIDS were identified by gathering information from existing Business Coalitions, members and partners of the World Economic Forum working in the field of AIDS (particularly UNAIDS, The World Bank, ILO and GTZ, CCA, PharmAccess Foundation and SIDA-ENTREPRISES) and through internet/desk based research. While best efforts were made to identify all Business Coalitions tackling AIDS, there may be a number of coalitions that have been unintentionally omitted from this report for which we apologize. It is acknowledged that there are a number of Business Coalitions dealing with infectious diseases, but for the purposes of this exercise, only those focused on tackling AIDS are reviewed.

Regional and national profiles

For each identified Business Coalition, an individual profile was created based on telephone or face-to-face interviews. These profiles capturing information on background, organizational structure, membership, activities and services, relationships with other organisations, funding, success stories, future prospects and challenges can be downloaded for free from www.weforum.org/globalhealth. In some cases, profiles are available in the local language as well as English.

Limitations of this report

This report includes all known Business Coalitions tackling AIDS existing today as well as those we know are in the pipeline for launch in 2008-2009. Additional coalitions may be highlighted for launch as this report goes to print. This only demonstrates the demand for their existence and services, which presents a huge opportunity to continue to strengthen the business response to AIDS. The report does not go into detail for every coalition as this information is available in the individual country profiles.

However, it does provide a high level overview of Business Coalitions highlighting key observations made with specific and relevant examples where possible to fulfill the desired objectives. In countries where more than one Business Coalition exists, it was not always possible to profile each organisation.

Report structure

This report draws on data from four regional Business Coalitions tackling AIDS, 47 national Business Coalitions and 10 yet-to-be launched coalitions. It can be broadly divided into five main sections.

The Executive Summary draws high-level conclusions based on the data gathered in the profiles and subsequent discussions. It presents key findings that pave the way forward for Business Coalitions and their supporters to take focused, coordinated and effective action against the epidemic.

Preliminary sections of the report provide a basic understanding of Business Coalitions tackling AIDS, the activities and services they provide, and their role in the national response to AIDS. The sections highlight relationships and partnerships crucial to the existence and success of the Business Coalitions and the impact they are making on local businesses and communities.

The main body of the report analyses the different organizational, governance, membership and funding models that regional and national coalitions employ and how they tie in with local social, economic and political agendas.

By understanding the different Business Coalitions models that exist today, current and emerging coalitions are challenged to evaluate their own operations, services and funding models to ensure long-term sustainability. For this reason, a number of Business Coalitions have been relaunched. Lessons can also be learned from the few Business Coalitions that have ceased to exist for a variety of reasons.

The report concludes with challenges and opportunities for Business Coalitions tackling AIDS, paving the way forward for Business Coalitions, the private sector, government and donors to determine priorities and next steps to further strengthen the private sector component of each country's national response to AIDS.

A "World Directory of Business Coalitions Tackling AIDS" with key contact details for each coalition can be found at the end of this report.

Executive Summary

Business Coalitions tackling AIDS have emerged as an effective platform for the private sector response to the epidemic. Already, this disease has claimed the lives of 25 million in the global workforce and remains a threat to business. Although some companies are effectively addressing the issue in the workplace, this often tends to be in isolation. Other companies are aware of the risks to their business, but simply do not know how or where to start mitigating risks. Many companies are focused on their core business and do not have time to address the issue. The Business Coalition model has emerged to fill this gap and provide the private sector with the tools and processes it needs to effectively address HIV and AIDS in the workplace.

Business Coalitions act as a voice for the private sector, often through representation on national AIDS committees and interactions with other key stakeholders. They increase business action through advocacy and supporting the design, development and implementation of workplace programmes by providing the necessary materials, tools and training. While most coalitions focus on AIDS, some have expanded to include services to address the impacts of TB and malaria. Some offer special services such as implementing a nationally recognized accreditation process for company AIDS workplace policies and programmes and the development of public-private partnerships to deliver treatment.

To date, there are four regional Business Coalitions and 47 national Business Coalitions with a further 10 national Business Coalitions scheduled for launch in 2008-2009. Collectively, these coalitions have already reached more than one million (1,088,000) organizations with HIV and AIDS policies and programmes. The individual regional and country profiles can be found on www.weforum.org/globalhealth.

Business Coalitions are still a relatively new concept worldwide; more than 40% were launched in the last two years and more than 60% in the last five years. The four regional coalitions spanning Africa, the Arab region, Asia Pacific and the Caribbean were launched in the last two years.

To ensure success, coalitions have formed partnerships at the national, regional and international levels with key stakeholders. In addition to the private sector, these include international donors and

stakeholders, other regional and national Business Coalitions, governments and civil society groups. These relationships are not only critical for the coalitions, but also for the wider stakeholder group to deliver a coordinated and complementary response to the epidemic.

Like any business, Business Coalitions are in a constant state of growth and flux as their business models evolve to meet their needs and the needs of their clients, the private sector. With three models in operation – membership based, fees for services and a hybrid model – they continue to engage companies.

Regional coalitions offer national coalitions the opportunity to share experiences, exchange expertise and find solutions to some of the more complex, but common challenges within regions of working with the private sector in the area of AIDS. The four regional coalitions have also identified opportunities for working together to create synergies, provide political leadership, engage MNCs (multinational companies) and share materials, insights and information to develop common approaches to tackling AIDS and to support the Business Coalition movement worldwide.

Due to their high demand and rapid growth, many Business Coalitions are concerned about their long-term sustainability. Most of the challenges they face can be classified as financial or capacity based. Some coalitions are still struggling with how to prioritize their products and services for selected target groups. For example, working with Small and Medium Sized Enterprises often requires a different approach than working with MNCs or large nationals. Working with the informal sector is even more difficult, although the informal private sector networks are central to the economic health of many countries. It is more time consuming to work with smaller companies, which almost always takes more effort, resources and budget to support workplace programmes.

In summary, *Business Coalitions Tackling AIDS: A Worldwide Review, January 2008* presents the current Business Coalition landscape and suggests next steps for all stakeholders to build on the global momentum and success with engaging the private sector. The “World Directory of Business Coalitions tackling AIDS” at the back of this report is a resource included to help strengthen the global network through increased dialogue and coordinated action.

What is HIV and AIDS?

HIV stands for human immunodeficiency virus. HIV is a retrovirus that infects cells of the human immune system (mainly CD4 positive T cells and macrophages - key components of the cellular immune system), and destroys or impairs their function. Infection with this virus results in the progressive depletion of the immune system, leading to immune deficiency.

AIDS stands for acquired immunodeficiency syndrome and describes the collection of symptoms and infections associated with acquired deficiency of the immune system. Infection with HIV has been established as the underlying cause of AIDS. The level of HIV in the body and the appearance of certain infections are used as indicators that the HIV infection has progressed to AIDS

Source: UNAIDS Fast facts about AIDS

Threat of AIDS to Business

AIDS is crippling the global economy. It has already claimed the lives of 25 million⁴ in the global workforce and continues to remain a threat to businesses. The International Labour Organization (ILO) estimates that 36.3 million persons of working age (15-49 years) are now living with AIDS⁵ with 40% of the 4.3 million people newly infected in 2006 being young adults aged 15-24 years⁶. In an annual survey conducted by the Global Health Initiative of the World Economic Forum⁷, which covers the opinions and concerns of 10,993 business executives in 117 countries, 46% of firms worldwide expect AIDS to have an impact on their operations in the next five years; an increase of 9% in one year alone. In countries where prevalence rates are above 5%, nearly all respondents expect an impact on their firms' operations in the next five years.

Private sector responds to the AIDS threat through workplace programmes

As the epidemic continues to affect the working population, the private sector is scaling up its response by complementing the work of the traditional public sector and civil society actors for a variety of reasons:

- Direct impact on businesses and their employees
 - Increased costs due to rising health insurance,

sick leave, funeral costs, recruitment and training skilled workers

- Decreased productivity due to absenteeism resulting from sickness, caring for family and dependents and organizing and attending funerals, and low moral at work due to losing family, friends and colleagues
- Proactive approach to minimizing the risk or potential risk of AIDS to their business
- Personal interest and motivation at the senior management level
- Health-focused corporate social responsibility agendas
- Global public image and reputation of the company
- Investor and consumer trends towards ethical sourcing

Although companies are successfully developing and implementing workplace policies and programmes to address AIDS, which include educating employees and providing access to testing, treatment, care and support, some are doing so in isolation. Other companies are aware of the risks, but they simply do not know where to start and what to do to mitigate the risks in the workplace. Many companies are focused solely on their core business and do not have the time to even address the issue. The Business Coalition model was developed to fill this gap and provide the private sector with the tools and support necessary to develop a comprehensive response to the epidemic.

Business Coalitions emerge as a channel to support the private sector response

The term "Business Coalitions" in this report is used to signify organizations of businesses joined together to address the issue of AIDS. It may also include sectoral associations, chambers of commerce, labour unions, employer federations and other groups of companies that have committed themselves to addressing the issue of AIDS.

National Business Coalitions remove the need for companies to act in isolation. Instead they provide a

⁴ UNAIDS/ WHO 2006 AIDS epidemic update

⁵ International Labour Organization Press Release 2006 (ILO/06/56)

⁶ UNAIDS/ WHO 2006 AIDS epidemic update

⁷ Annual Global Business Survey, Global Health Initiative, World Economic Forum, Survey 2005-2006, 10,993 firms in 117 countries

forum for companies to exchange and share information and key learnings and act together through pooling of resources. They support business through a range of activities and services from establishing policies to monitoring and evaluation of workplace programmes. In addition, Business Coalitions provide a mechanism for public relations and communications that support the strategic goals of the national plans.

This movement to establish Business Coalitions supports the “Three Ones” principle endorsed by key stakeholders from around the world in 2004. This principle was launched to effectively and efficiently use resources to ensure rapid action and results-based management.

Three Ones Principle for the Coordination of a National AIDS Response

- One agreed HIV Action Framework that provides the basis for coordinating the work of all partners
- One National AIDS Coordinating Authority, with a broad-based multisectoral mandate
- One agreed country-level Monitoring and Evaluation System

Source: UNAIDS

Business Coalitions are a relatively new concept around the world; over 40% were launched in the last two years and over 60% in the last five years. See Figure 1. It is interesting to note that nearly 50% of coalitions launched in 2007 were around World AIDS day.

Figure 1 43% of all national Business Coalitions were launched in the last 2 years with 62% launched in the last 5 years



The first established Business Coalition, TBCA (Thailand), was launched in 1993, closely followed by BBKA (Botswana) launched in 1994 and CEN (Brazil) launched in 1998. Today, there are 47 Business Coalitions around the world that have emerged to help the private sector tackle AIDS. An additional 10 coalitions are scheduled for launch in 2008-2009.

Figure 2 Launch dates of national Business Coalitions tackling AIDS around the world

Thailand	1993	Malawi	2003	Belize	2007
Botswana	1994	Nigeria	2003	Burkina Faso	2007
India (FICCI- SEDF)	1997			Cambodia	2007
Brazil	1998	Ethiopia	2004	Fiji	2007
		Mexico	2004	Guatemala	2007
Algeria	2000	Tanzania	2004	Indonesia (IBCA)	2007
India (IBT)	2000	Zimbabwe	2004	Papua New Guinea	2007
Kenya	2000			Sierra Leone	2007
South Africa	2000	India (TERI-BCSD)	2005	Sri Lanka	2007
Zambia	2000	Mozambique	2005		
				<i>Planned</i>	
DRC	2001	Suriname	2005	Argentina	2008/9
Myanmar	2001			Benin	2008/9
Rwanda	2001	Cameroon	2006	Chad	2008/9
Swaziland	2001	Cote d'Ivoire	2006	China	2008/9
Uganda	2001	Egypt	2006	Gambia	2008/9
		Ghana	2006	Guinea	2008/9
Barbados	2002	Guyana	2006	India (IBCA)	2008/9
Indonesia (NBA)	2002	Jamaica	2006	Pakistan	2008/9
Namibia	2002	Mali	2006	Paraguay	2008/9
Singapore	2002	Mauritania	2006	Vietnam	2008/9
		Morocco	2006		
		Sudan	2006		
		Zanzibar	2006		

Newer still are regional Business Coalitions. All four have been formed in the last two years.

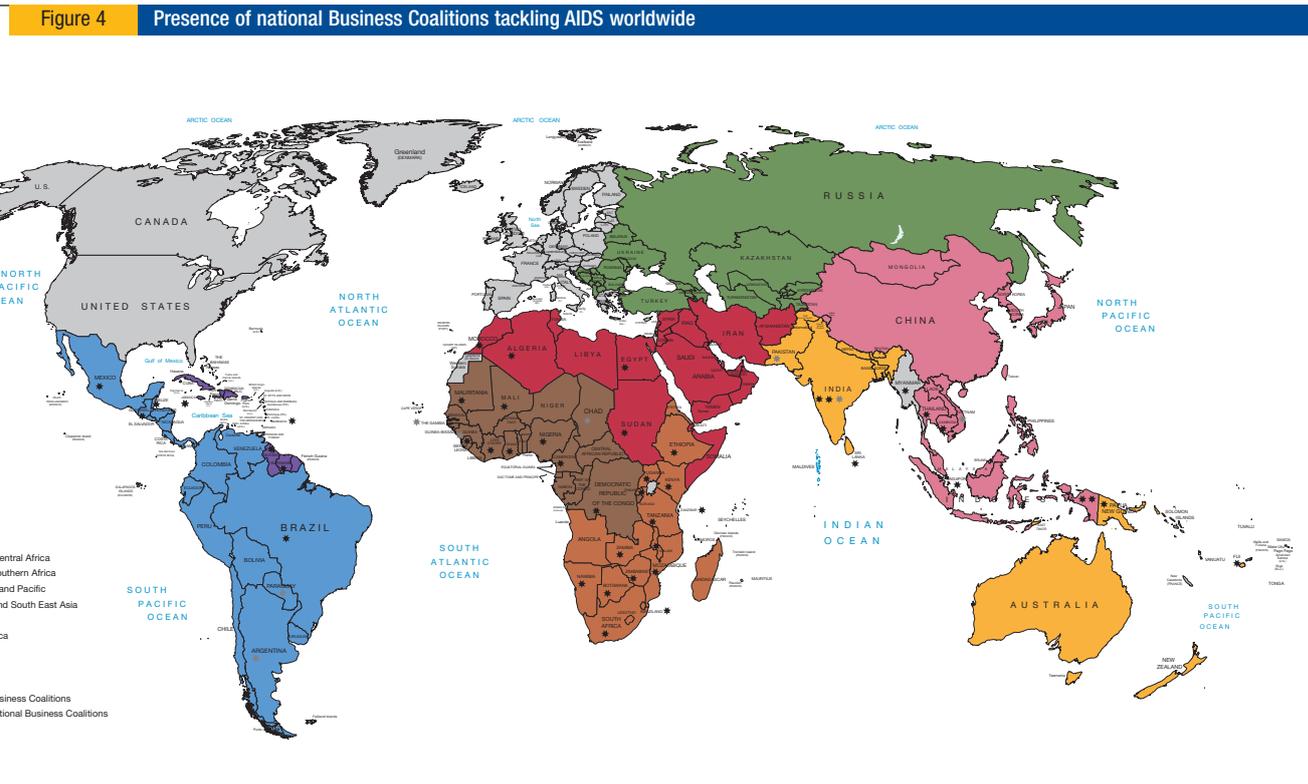
Figure 3 All four regional Business Coalitions have been launched in the last 2 years			
Pan-Africa Business Coalition	PABC	February 2005	
Pan-Caribbean Business Coalition on HIV/AIDS	PCBC	October 2005	
Asia-Pacific Business Coalition on AIDS	APBCA	February 2006	
AIDS Business Coalition in the Arab Region	ABCAR	May 2007	

As Figures 2 and 3 highlight, Business Coalitions are a global phenomenon. Figure 4, which captures their presence on a world map.

International organizations support establishment of Business Coalitions

Business Coalitions came about as a joint initiative between the World Bank's ACTAfrica campaign, the GHI and UNAIDS alongside local private sector initiatives. With the recognition that national Business Coalitions were an ideal platform for local business to

come together and pool knowledge, resources and create economies of scale to deal with an epidemic that was and still is affecting the workplace, the World Bank led the development of a manual entitled *Guidelines for Building Business Coalitions against AIDS*, together with the GHI and UNAIDS. Many coalitions have been launched since this manual, some with the support of international organizations such as UNAIDS, the World Bank, GHI, ILO, UNDP, SIDA-ENTREPRISES, USAID, Constella Futures, etc. and some by the private sector who recognized the business need to act.



Private sector supports establishment of Business Coalitions

In some countries, the drive for the formation of a Business Coalition was predominantly a push from the private sector. For example, the Ethiopian Business Coalition Against AIDS (EBCA) started when local business leaders came together out of deep concern for how the AIDS epidemic could impact their future. This included large companies, major business associations, SMMEs (small, medium and micro enterprises) and even the informal sector.

In Singapore, the Business Coalition was formed after the success of one of the first ever business conferences on AIDS in Singapore in November 2001, which brought together over 100 companies. The four conference organizers and founding members of BCAS felt businesses were ideally placed to take action against AIDS. Hence, BCAS was formed to lead the business response against AIDS, champion awareness in the workplace and tackle the associated stigma and discrimination. It started as a network of individuals and Singaporean and international companies. In Burkina Faso, AECV-B (Action des entreprises Contre le VIH/SIDA au Burkina-Faso) was created in April 2007 due to the leadership of a small group of French companies belonging to the SIDA-ENTREPRISES network. This coalition invited all companies in Burkina Faso (formal sector only) to join them in the fight against HIV/AIDS by organizing a big meeting in June 2007. Since the event, five companies have joined AECV-B, so today there are 15 member companies (French and national companies) and they are expanding. AECV-B has recently submitted a request to Partenaires contre le Sida to benefit from a country assessment to help them to build a focused action plan.

Chambers of Commerce, Employer Federations & Trade Unions support establishment of Business Coalitions

The Malawi Business Coalition Against AIDS (MBCA) started off as a private sector working group under the Malawi Confederation of Commerce and Industry in 2002 before it formally launched in 2003. Similarly, the Swaziland Business Coalition against AIDS (BCHA) began in 2001 as a substructure of the Federation of Swaziland Employers and Chamber of Commerce (FSE&CC) due to the increasing impact of AIDS noted in the workplace. In Mauritania, the national

employer's federation, Confederation Nationale des Patronats (CNPM), is one of the principal supporters of the Business Coalition (CEMA-VIH/SIDA). The CNPM holds a seat on the Executive Committee, provides offices for the coalition secretariat and hosts the coalition's website. The Chamber of Commerce in Benin has also been working with the National AIDS Commission in Benin to create a platform for a national private sector response to AIDS, TB and malaria. More details can be found in the chapter "Past, Present and Future Business Coalitions".

Governments support establishment of Business Coalitions

In some countries, the government has been a key driver in the establishment of a national Business Coalition. For example, in Nigeria, the Business Coalition was an initiative of the president and commander-in-chief of the armed forces of the Federal Republic of Nigeria and included 24 founding members.

Correlation between HIV prevalence and the establishment of a Business Coalition

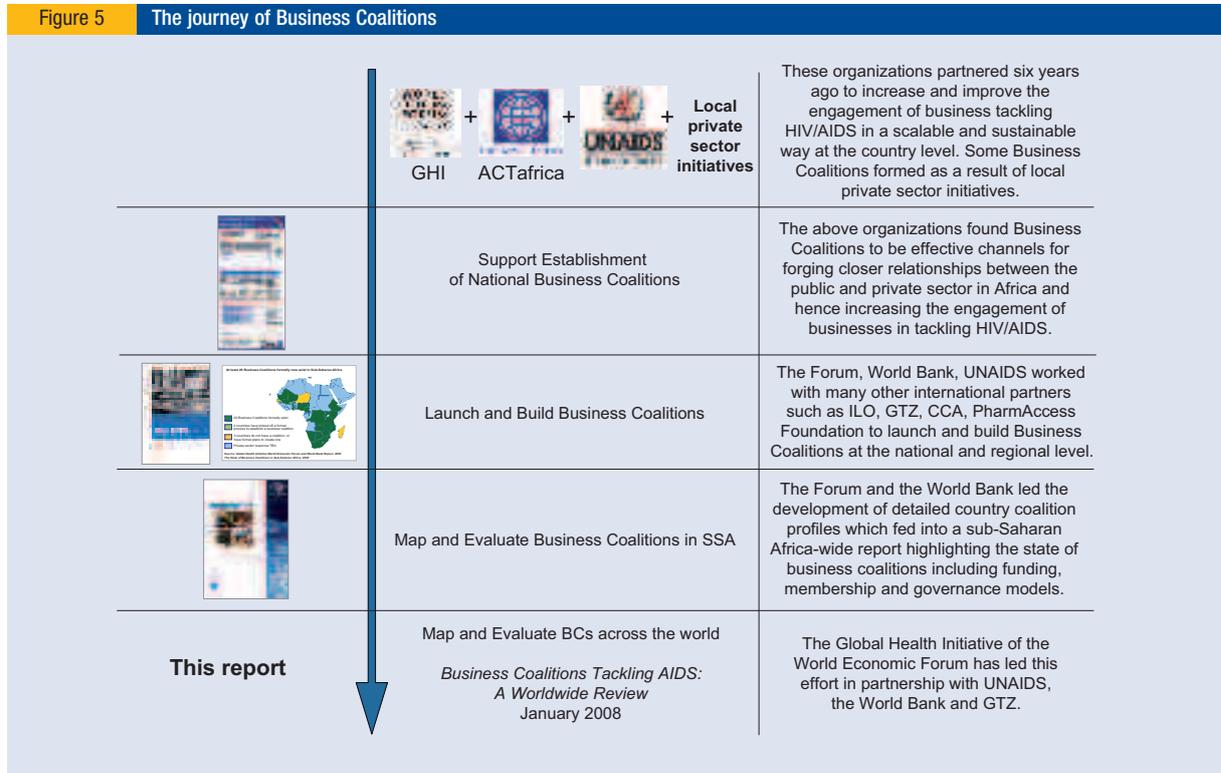
There appears to be no direct correlation between the national HIV prevalence⁸ and the presence of a Business Coalition. Business Coalitions exist in countries with very high prevalence such as Swaziland with 33.4 (21.1-45.3%) as well as low prevalence such as Egypt with <0.1 (<0.2%). However the high HIV prevalence in Papua New Guinea at 1.8 (0.9-4.4%), one of the highest in the region, was a strong driver for launching a Business Coalition. This was achieved in February 2007 with the support of APBCA.

Countries with more than one national Business Coalition

Some countries have more than one Business Coalition such as in India and Indonesia, but in these cases, the Business Coalitions tend to have slightly different focuses - for example, advocacy and awareness (Indonesia National Business Alliance) versus workplace programme development and implementation (Indonesia Business Coalition Against

⁸ UNAIDS report on the global AIDS epidemic 2006

Figure 5 The journey of Business Coalitions



AIDS) – and some serve different companies. In India, there are three Business Coalitions: TERI-BCSD, IBT and FICCI-SEDF. They all cover AIDS advocacy work but often share ideas on how to tackle the issues at common discussion platforms such as workshops, events and seminars organized by all three.

Regardless of the initial founders, Business Coalitions today work closely with all stakeholders in the country, which include the government national AIDS councils, private sector and international organizations as well as community and faith-based organizations and other areas of civil society. They have adapted their range of offerings over time to suit local private sector needs, and partnered with appropriate organizations where relevant.

Business Coalitions are successfully scaling up the national private sector response to AIDS by engaging and supporting companies - some that would not have otherwise acted.

Regional Business Coalitions Tackling AIDS

Regional Business Coalitions tackling AIDS have emerged to share experiences, exchange expertise and find solutions to some of the more complex, but common challenges within regions of working with the private sector and AIDS. Regional Coalitions are a new development and present new opportunities for mobilizing private sector support and action for mitigating the impact of AIDS throughout the world. Today, there are four known Regional Business Coalitions tackling AIDS, all launched in the last two years. (See Figure 6.)

Although they have all chosen to initially focus specifically on AIDS, in the future, the Asia-Pacific Business Coalition (APBCA) plans to examine the impact of diseases increasing HIV susceptibility (Sexually Transmitted Diseases - STDs) and the burden on care (TB). Similarly, the Pan-Caribbean Business Coalition (PCBC) plans to extend into non-communicable diseases in the future.

The role of regional Business Coalitions

Regional Business Coalitions were established to further engage and increase the private sector response to tackling the AIDS epidemic at both

national and regional levels to contribute to the success of national AIDS programmes. They achieve this through a variety of approaches, including supporting existing and new national Business Coalitions, which may involve linking countries without coalitions to existing national coalitions. Here are two examples:

The Pan-Africa Business Coalition (PABC) network is formed of existing anglophone and francophone African national Business Coalitions. PABC's priority is to ensure the collaboration and success of existing African national Business Coalitions, rather than being actively involved in the creation of new networks.

The Asia-Pacific Business Coalition (APBCA) has supported the establishment of a Business Coalition in Papua New Guinea (PNG BAHA) which has one of the highest HIV prevalence in the region (1.8% (0.9-4.4%)* as reported by UNAIDS in 2006. The PNG Business Coalition was launched on 31st January 2007. APBCA works closely with the highly successful Thailand Business Coalition on AIDS, launched 1993, and now has an office in Bangkok co-located with TBCA.

*UNAIDS 2006 Report on the Global AIDS Epidemic, Annex 1, Country Profiles, Adults aged 15 to 49 HIV Prevalence rate



Partners

Depending upon the area, different local, regional and international organizations have played a greater or lesser role in establishing and launching regional Business Coalitions. One of the critical success factors in launching regional Business Coalitions has been the partnership role of individual agencies building on the commitment and experience of companies, national coalitions and organizations in the world of work.

For example, UNAIDS and its co-sponsors have played a significant role in uniting the public and private sector in the Caribbean to launch the regional coalition. Similarly, the World Bank and the Corporate Council on Africa provided initial technical assistance and financial support for launching the PABC. It is common knowledge that champions are key in driving and delivering local support. For example, APBCA developed a particularly strong relationship with the UNAIDS Indonesia country coordinating manager who was able to provide a secretariat for the regional coalition.

The ILO brings to the table its constituent partners, the employers' federations and trade unions, as well as the Code of Practice to provide a policy blueprint. GTZ places people in countries to provide short- and long-term technical assistance, thus providing a consistent level of support to national and regional Business Coalitions in Africa.

The World Economic Forum plays a slightly different role, drawing upon its strong relationship with both the

private and sector public sector to catalyse global public-private partnerships (PPPs) to tackle global health issues such as AIDS. It also uses both Forum and other international and regional platforms to raise awareness and advocate for action against AIDS by the public and private sectors through partnerships. By developing and piloting concepts at the regional level to tackle the disease, the Forum allows companies to visualize how they can tackle the disease and identify the associated challenges and benefits. Along with the development of such tools and guidelines, the Forum is well positioned to conduct high-level and objective analysis to develop reports such as this one. The World Economic Forum also supports the development and launch of Business Coalitions including the recent facilitation of the launch of the AIDS Business Coalition for the Arab Region (ABCAR) at the World Economic Forum Summit in the Middle East.

In Asia-Pacific, the private sector took the lead in launching a regional coalition, which brought together high-level support from both the public and private sectors, and former US President William Clinton. When APBCA decides to establish a new national Business Coalition, it first meets with the ministry of health and the ministry of labour in the country to ensure there is interest in establishing a Business Coalition. This is an essential step in the process as the local private sector is unlikely to become involved in an initiative that is not supported by the government or that goes against a government decision.

Partners involved in establishing and launching regional Business Coalitions

PCBC	PABC	ABCAR	APBCA
<ul style="list-style-type: none"> ▪ Caribbean Association of Industry and Commerce (CAIC) ▪ Caribbean Employers Federation (CEC) ▪ Caribbean Congress of Labour (CLL) ▪ UNAIDS ▪ ILO ▪ First Caribbean International Bank ▪ Ministry of Health of Trinidad & Tobago ▪ CARICOM Secretariat 	<ul style="list-style-type: none"> ▪ Corporate Council on Africa ▪ GBC ▪ GTZ ▪ UNAIDS ▪ World Bank ▪ World Economic Forum 	<ul style="list-style-type: none"> ▪ UNDP ▪ ILO and ALO ▪ World Economic Forum ▪ World Bank/IFC ▪ Shell EP International ▪ Lafarge ▪ Boecker Public Health Group ▪ Standard Chartered Bank 	<ul style="list-style-type: none"> ▪ Former US President William Clinton ▪ Australian Minister for Foreign Affairs ▪ AusAID ▪ ILO ▪ Deacons ▪ Qantas ▪ News Ltd ▪ PwC ▪ Saatchi and Saatchi

Increasing private sector involvement in the establishment of Regional Business Coalitions

Structural models

There are currently two structural models employed by regional Business Coalitions: the 'NBC only (National Business Coalition) membership' and 'mixed membership' models. PCBC and PABC employ the first model as their members are national Business Coalitions and were formed to serve a network of national Business Coalitions in the region. In both regions, because a number of national Business Coalitions already exist, the intent was to provide a high level platform for information exchange. Such a platform allows Business Coalitions to share ideas, information, knowledge, best practices, useful contacts and technical support.

The PCBC is coordinated by the Caribbean Association of Industry and Commerce (CAIC), which acts as a secretariat and comprises of the national Business Coalitions. No individual companies are members of the PCBC Regional Business Coalitions.

PCBC has five national Business Coalition members: Barbados, Belize, Guyana, Jamaica & Suriname

PABC has 16 national Business Coalition members: Botswana, Ethiopia, Gambia, Ghana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Nigeria, South Africa, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe.

This is a contrast to the alternative model which has been adopted by both ABCAR and APBCA. In this model, both the regional coalitions first established themselves as an entity then sought to engage existing coalitions and the private sector as members. Hence the term 'mixed membership'. For countries in this region where a Business Coalition did not exist – and particularly where the HIV prevalence is high – the regional coalitions stepped in to work with the government and the private sector to establish national Business Coalitions.

APBCA has since launched a new Business Coalition in PNG, Cambodia and Indonesia. APBCA has received requests from the Indian and Chinese governments to engage with the private sector in these countries and include national coalitions in the APBCA network in the near future. ABCAR hopes to support the launch of future national Business Coalitions in Jordan, Saudi Arabia and Dubai. For

APBCA, linking existing national coalitions to form a regional coalition was not an option as the private sector operating in the region demanded a more policy and intervention focused approach from national coalitions rather than just advocacy, awareness and lobbying.

APBCA has seven national coalition members: Cambodia, Indonesia (IBCA), Myanmar, Papua New Guinea, Singapore, Thailand, Vietnam – members must be at least 50% funded by the private sector to be an APBCA member to ensure long-term sustainability.

ABCAR will seek to engage and collaborate with four existing national coalitions in the region – Algeria, Egypt, Morocco and Sudan – and hopes to support the launch of more national coalitions in the Arab region in the future.

Both models have been successful in raising the profile of national Business Coalitions and positioning them as effective channels for the private sector response to AIDS.

Governance

In line with the organizational models, the boards of APBCA and ABCAR are made up of predominantly private sector companies, whereas the boards of PCBC and PABC are made up solely of national Business Coalition representatives.

Funding models

National Business Coalitions tend to have private sector funding and donor agency resources – the percentage of which varies with individual national coalitions. Regional Business Coalitions have primarily two sources of funding, which are in line with the two operating models described above.

PCBC does not currently charge national Business Coalitions for membership in the regional coalition, but is considering introducing fees in the future. Currently, the regional coalition obtains 40% of its funding from UNAIDS, CDC (US Centers for Disease Control) and PANCAP (Pan-Caribbean Partnership Against HIV/AIDS). The funding has been secured for the next three to five years for the implementation of its medium-term plan, 40% from the private sector for specific projects, and 20% from other sources.



Funding for the PABC, which shares a similar model to PCBC, will come from membership fees to be paid by individual national coalitions. Currently, PABC does not have any funding. The secretariat services are currently provided by the Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria in Kenya and there are no full-time staff. GTZ is supporting the PABC with establishment costs (company registration, website/logo design) and has committed to providing additional technical support in the immediate future. The PABC advisory committee is made up of representatives from eight national coalitions. The chairmanship comes from the South African Business Coalition on HIV/AIDS (SABCOHA), which also provides administrative and logistical support. PABC does not partner with the government as this relationship is maintained by the individual national coalitions at the National AIDS committee level.

Most of APBCA's funding comes from the private sector. The key sponsor is Qantas Airlines, with additional in-kind support provided by founding companies represented on APBCA's board. Additional funds are raised from APBCA's other members in the form of an annual membership fee. APBCA currently has 27 members and offers two levels of membership which includes free membership for not-for-profit companies and research institutes. APBCA does not seek funding from governments.

APBCA's two membership levels

1. Standard Corporate membership; \$AUD 5,000 per annum.
2. Partners/Honorary membership/ not-for-profit companies/ research institutes: no membership charge.

APBCA also receives considerable in-kind support from member companies to cover office costs, legal, accounting, travel, secondees and website design and marketing.

ABCAR has not yet received any funding due to the delay in establishing the legal entity. UNDP is currently funding ABCAR and will do so until March 2008 when it is envisioned that funds can be channelled from company membership fees. ABCAR's focus is on employees and the private sector. For this reason, it also hopes to limit government involvement, which may help to define and steer the focus. The annual membership fee will be determined by the companies,

and will also allow smaller companies to become members. There are currently four national coalitions in the Arab region. ABCAR is still to determine how to engage and collaborate with them.

Funding implications

In the APBCA and ABCAR model, where funding is sourced predominantly from the private sector, one may question whether conflict may arise. Should a large company become a member of the regional or national coalition(s) given it must pay a membership fee to each? However, the regional coalitions tend to be supported by large multinationals operating at a regional level. For example, Shell regional office for the Arab region supports ABCAR whereas national coalitions tend to be funded by the local division of either a large multinational such as Shell in Egypt or by local companies. The funding tends to come out of different budgets for the multinational making it possible to provide support at both the national and regional level.

In situations where companies can only support initiative, the aim of the regional coalitions is to ensure that funding is directed to national coalitions. For example, APBCA recently directed Chevron to support the new Indonesian Business Coalition (IBCA), and ABCAR redirects national organizations to support local national coalitions where they exist.

It is key that the private sector supports national coalitions to ensure the latter's long-term sustainability.

Expectations of National Business Coalitions

A number of national Business Coalitions were asked what support and services they expected from their regional Business Coalition. The responses were similar across the different regions – all have high expectations. Some of their most common aspirations are listed below with the most important being sharing and learning from the other coalitions in the region:

- Sharing of information, experiences and best practices across the region.
- Identifying new ways to leverage financial and technical resources to enhance private sector involvement.
- Increasing private sector membership and hence engagement, especially with regards to

multinationals operating in the region in multiple countries.

- Executing baseline surveys/impact assessments across borders or in specific regions.
- Implementing a common approach to tackling AIDS in the region.
- Lobbying at the sub-regional and regional levels to overcome socio-political obstacles to progress on AIDS related matters.
- Sharing of resources and skills across the different national coalitions.
- Increasing collaboration and the opportunity to discuss regional challenges and issues.
- Monitoring and evaluating regional and cross-border trends of AIDS and/or other infectious diseases, for example TB and malaria.
- Providing specific guidance to address identified needs and challenges.
- Identifying strategic options for mobilizing private sector resources and leadership.

One African national coalition summed up their hopes for the PABC to “become the voice of business in Africa.”

Future Opportunities

Despite the four regional Business Coalitions being in different stages of development and supporting different organizational, membership and funding structures, the goal is the same: To create AIDS awareness and educate employees on how to prevent or effectively address the epidemic in the workplace. Several opportunities for working together have been identified.

Synergy

Create synergy and common positions on HIV Policy issues among the country Coalitions, for example pre-employment, during and post-employment HIV testing.

Political leadership

Advocate for political leadership on some critical matters and also try to link the private sector's response to HIV to the overarching political regional institutional response. For example in the Caribbean, The Pan-Caribbean Business Coalition is linking up with the Pan-Caribbean Partnership Against AIDS on key political HIV and AIDS issues.

Multinationals

There is an opportunity for regional Business Coalitions to work with the same MNC across several different regions. This makes it easier for MNCs to have a more focused impact as they can concentrate work with a fewer number of coalitions. The regional coalitions could help direct efforts in line with what the MNCs, the national and regional coalitions need.

Materials

Regional coalitions can share their existing training materials so as to not duplicate any efforts. For example, APBCA has developed a training manual based on the ILO Code of Practice, which could be used across the other regions. In some cases, translated materials can be shared. For example, French speaking Vietnamese can use training materials developed for Francophone Africa.

Insights

Given that some of the regional Business Coalitions are more established than others, or have focused their efforts to develop different skills, there is an opportunity for the coalitions to share tips and best practices. For example, APBCA has considerable experience in establishing new Business Coalitions in the region. This knowledge would be extremely useful for ABCAR, which is looking to launch some new Business Coalitions in the Arab region in the near future.

Standards

The South African National Standards (SANS) Bureau having launched a new standard for the management of HIV and AIDS in the workplace called SANS 16001:2007. The AIDS Standard Organization (ASO) in Thailand has launched a workplace standard. This presents an opportunity to develop a global AIDS workplace standard that is recognized by companies around the world.

Both the International Standards Organization (ISO) and the private sector – including large multinationals such as Unilever – have expressed an interest in such a global standard. Unilever's current roadmap on HIV and AIDS includes accreditation as a measure of success of their HIV and AIDS programmes implemented within the organization, with their customers and with their suppliers. Such a standard would give companies an added incentive to work with Business Coalitions, which could be trained to



accredit their HIV and AIDS workplace management procedures and programmes.

Such a standard would also give companies and added incentive to work with Business Coalitions. The regional Business Coalitions could support this effort by providing regional input into the development of this standard. National coalitions could then be supported to help companies implement such standards in the workplace.

The World Economic Forum initiated discussions with both ISO and ILO in this area where both bodies would ensure harmonization among different standard-setting initiatives, taking account of the new international labour instrument on AIDS being developed at the ILO. Simultaneously, APBCA has been actively working in the area together with its national coalitions (especially Thailand), the developers of the SANS 16001 standard, and with the World Economic Forum.

Meetings

The four regional coalitions came together for the first time via teleconference in November 2007. There are numerous opportunities for this group to meet and work together more closely. They should also look to ensure MNCs, donors, governments and all other key stakeholders are aware of each other. The next scheduled meeting is in March 2008.

Databank

Regional coalitions should explore the creation of a common place to host information and documentation or provide links to sources that already provide this information. Information could include up-to-date country contact information, current programmes and policies, legal frameworks, national labour laws, and policies. This information should be used to catalyse cross-fertilization of ideas, learning and scaling up of programmes, and document approaches of effective initiatives. The back of this report contains key country contact information as a start. This directory together with individual national and regional Business Coalition profiles can be found on www.weforum.org/globalhealth.

Activities and Services of Business Coalitions

This chapter examines the various activities and services provided by national Business Coalitions around the world as summarized in Figure 7. Regardless of their geographical location, they all provide similar services to the private sector, whether it be as part of the membership package or on a fee-for-service basis. The chapter also looks at the how the disease area focus changes across regions and highlights specific activities carried out by select Business Coalitions.

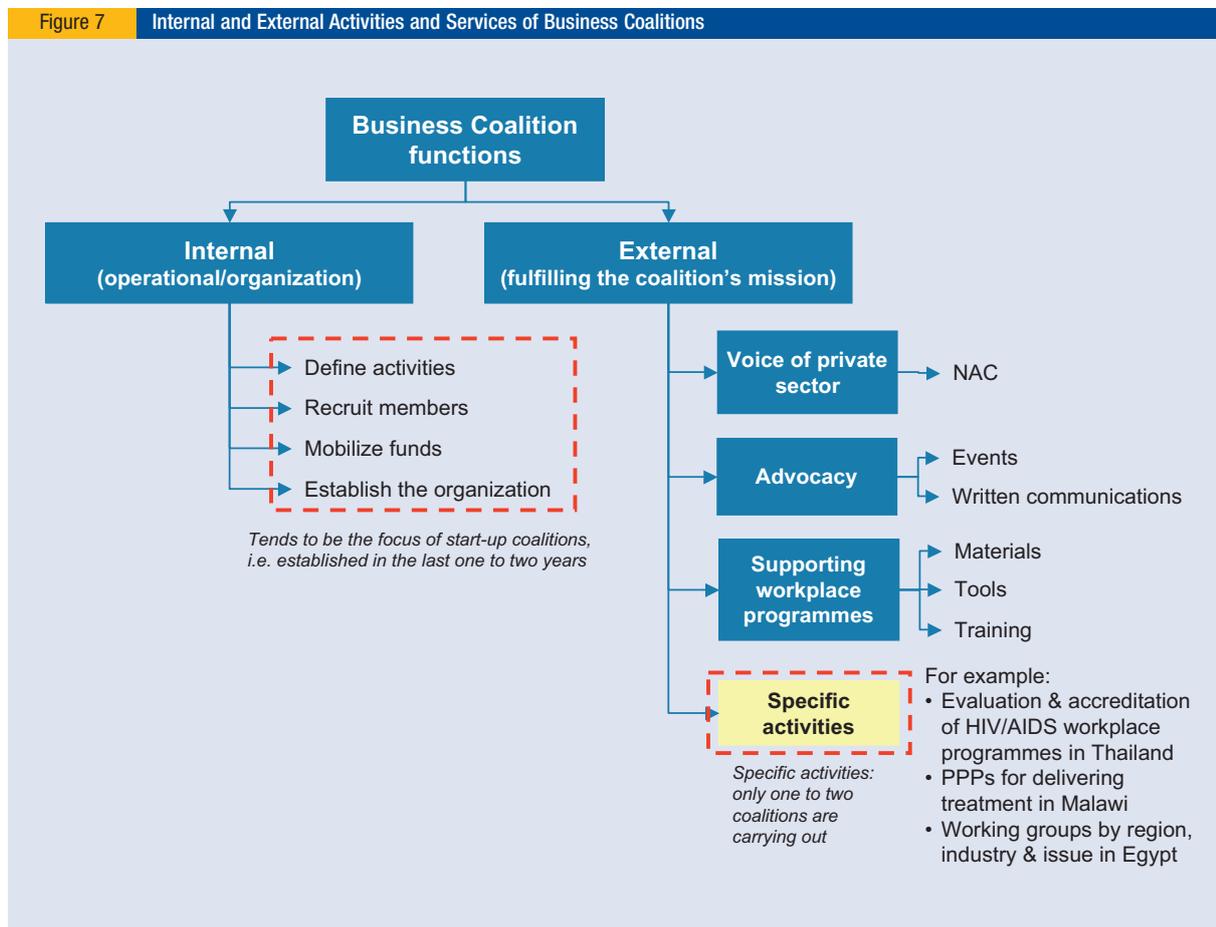
Internal activities

When coalitions are first being established they tend to spend the majority of their time focused on activities such as:

- Understanding what support the private sector requires and appropriately designing a suite of services to meet their needs

- Defining a specific mission and goals that are incorporated into their launch workplan
- Developing strategies and plans on how to further engage the private sector. (See CEN example in Brazil on the following page)
- Recruiting a membership base, which often involves educating companies on the need to take action
- Mobilizing funding, which can take a while whether it is done through collecting membership fees or obtaining funding from international organizations. In the case of ABCAR (AIDS Business Coalition in the Arab Region), the coalition needs to fully complete its legal registration before it is able to access any funding, which makes it difficult for it to start external activities
- Defining and establishing the organization and governance structure
- Hiring a technical director to implement the coalition's vision

Figure 7 Internal and External Activities and Services of Business Coalitions



In time, coalitions move their focus from internal to external activities.

CEN (Brazil) – 2007-2008 Strategic Objectives:

- Grow the number of companies with AIDS prevention programmes
- Provide technical support to companies, especially SMEs, to make the greatest impact with their workplace programmes
- Deliver technical support to companies (primarily small ones), looking for best results and correct information
- Promote recognition for the best practices in tackling AIDS
- Implement an information system for the employers
- Guarantee the future sustainability of CEN

External activities

All the external activities carried out by Business Coalitions are directed towards boosting the private sector's voice, engagement and action against HIV/AIDS in the workplace.

Raising the voice of the private sector at the national level

For most companies, their link into the National AIDS Coordinating bodies (NACs) tends to be via national Business Coalitions. By serving as a single point of contact for the private sector and for the NACs, Business Coalitions are in a powerful position to act as a vehicle for the private sector to deliver messages to the government in a coordinated and powerful way to stimulate business action. The Botswana Business Coalition on AIDS has a particularly strong relationship with the local NAC because it operates within the National Strategic framework. This is described in more detail in the call-out box in the chapter, "Role of Business Coalitions in the multi-sectoral response to AIDS".

Another example in Asia is Myanmar where the Business Coalition has close relationships with the National AIDS programme. CIELS (DRC), in collaboration with the Ministry of Labour, the UNDP and the ILO, has supported the National AIDS Commission in the development of a national workplace policy and integration of the private sector into the national AIDS strategy.

Increasing business action through advocacy

Business Coalitions advocate both for themselves and for private sector action by lobbying members and non-members, including company employee dependants and community or faith-based groups that include people of working age. Strategies include hosting national forums and membership meetings, coordinating trainings and sending electronic and paper informational newsletters and updates.

NBA (Indonesia) held a series of meetings in 2003-2004 with leaders of 200 private sector organizations from commerce and industry, representing more than 10,000 companies, to gain the commitment of business management to the national fight against HIV/AIDS.

In December 2003, NBA Indonesia, together with ILO and UNAIDS Jakarta, co-hosted the Asia-Pacific HIV/AIDS Workshop on Private Sector Mobilization in Denpasar, Bali. Delegates from 11 countries and a large group from Indonesia participated.

In Singapore, as in many other countries, Business Coalitions visit individual companies to raise awareness.

BCAS (Singapore) operates as a public education and training service provider and has no members. With one full-time staff member, it has trained nearly 80 business managers about HIV/AIDS workplace management, education and awareness, policy development and training of trainers. BCAS advocates for action by directly calling or emailing senior management to discuss the benefits of taking action at the workplace and the risks of not taking action.

Advocacy and awareness-raising events include:

- Breakfast meetings where a couple of member companies come together to exchange and share information.
- SME-specific workshops. For example, BBKA (Botswana) brought together 25 SMEs in May 2006 to educate them on the GHI's Beyond Big Business programme, launched by the GHI in October 2005

to encourage businesses to tackle HIV and AIDS at the workplace through their supply chains in partnership with other MNCs, large national companies and SMEs.

- World AIDS Day events. For example, AFBI (Barbados) organized a public testing event for 40 business leaders. Similar events are also carried out in other national coalitions such as in Mozambique (ECoSIDA) where the CEOs and financial directors of 23 companies were publicly tested on national TV in front of their employees to demonstrate the importance of knowing your status. FICCI-SEDF (India) teamed up with the Rotary Club in Bangalore to hold a candle light march on World AIDS Day. BBC conducted a special interview with BCAS (Singapore) on Business News Asia on World AIDS Day, which was broadcast by the BBC across the region.
- The World Bank, UNAIDS and GHI led regional meetings to bring Business Coalitions and stakeholders together to network and learn. Five such forums have been held to date.
- International conferences such as those organized by the International AIDS Society allow Business Coalitions to access many stakeholders through public and private events.
- Business Coalitions also organize conferences such as the annual national conference organized by CONAES (Mexico) in Mexico City in 2005, which was attended by public, private and civil society leadership from all parts of Latin America. At the second annual conference in 2006, businesses tackling AIDS were ranked to encourage positive competition among them. The levels awarded are silver, gold and platinum. The level a company attains is announced during the conference, which encourages them to step up action and aim for a higher level award next year.
- NBA Indonesia organized a series of meetings and workshops in 2003-2004.
- Issue forums sponsored by Business Coalitions, such as those organized by JaBCHA (Jamaica), provide a space for private sector employees to come together to discuss the impact and implication of AIDS in various industries such as food and hospitality, as well as insurance

Increasing business action through supporting workplace programmes

Most Business Coalitions offer technical support to companies implementing HIV and AIDS workplace programmes. Almost all coalitions provide at least one of the three types of support listed below, however, some are able to offer their members all three.

Materials

Business Coalitions can provide companies with a range of materials to develop and implement workplace programmes, including information, education and communication material. These materials can be in the form of guidelines or policies, or they can provide information on access to treatment and services. CONAES (Mexico) supported Colgate Palmolive in implementing country-specific HIV workplace policies.

In 2006, CONAES identified its primary goals for the upcoming year: all of its members to have an HIV-specific workplace policy. To date, all but five members have a workplace policy. Colgate Palmolive spearheaded this initiative. In 2006, Colgate Palmolive drafted and approved a regional workplace policy with support from Impulso, a Mexican HIV/AIDS NGO Network. This NGO network provides technical support to CONAES as well as its members.

Colgate Palmolive's regional policy served as a basis for their country-specific policies in all of their Latin America offices. CONAES and its implementing partners took the lead and worked with Impulso to further strengthen and develop their skills and knowledge in policy development. As a result of the workplace policy initiative within CONAES, Colgate Palmolive has implemented approximately 10 country-specific policies across Latin America.

One of the countries where Colgate Palmolive implemented the new country-level workplace policy was Guatemala. Through this initiative, Colgate Palmolive became one of the founding members of the new Business Coalition in Guatemala, FUNDEC-VIH (Fundación de Empresas Comprometidas con el VIH). FUNDEC-VIH was launched on 30 November 2007 with its first public event to commemorate World AIDS Day.



Generic materials can be adapted and branded to meet individual company requirements. Other types of materials offered include DVDs and videos, which coalitions can lend their members for use in the workplace. KHBC (Kenya) has 100 videos on HIV and AIDS that companies can borrow to show in the workplace to educate their employees. GBCA (Ghana) offers companies technical advice and support on how to implement condom distribution programmes at the workplace while CECI (Cote d'Ivoire), distributed 216,000 male condoms and 2,500 female condoms to companies in 2005 and 2006.

Tools

A number of coalitions provide workplace programme toolkits that can be implemented directly by the company. JaBCHA (Jamaica), CONAES (Mexico) and FUNDEC-VIH (Guatemala) offer their members a software tool called the Workplace Policy Builder (WPB), which was designed by Constella Futures. This tool is used to assist companies in the development of their own HIV and AIDS workplace policy. CONAES works with Impulso to assist in the implementation of the software tool and to provide additional technical assistance in the workplace, such as the development of prevention and public awareness campaigns. JaBCHA plans to train trainers from the government and civil society sectors on the use of this new tool, including workplace programme officers from the National HIV Programme, who will in turn train company employees. This is expected to facilitate the development of HIV workplace policies and programmes. Other toolkits include GTZ/ACCA toolkit offered by CECI (Cote d'Ivoire), which is described in more detail in the chapter, "Role of Business Coalitions in the Multi-sectoral Response to AIDS".

Training

Many of the coalitions offer training in one form or another. Some, such as GBCA (Ghana), have very detailed menus specifying target audience, content and duration as highlighted in the call-out box. Many, such as MBCA (Myanmar), offer a range of training services including executive briefings either one-to-one or in the form of seminars, Human Resource Manager workshops, staff training for all levels, peer educator training and training of trainers. CEMA-VIH/SIDA (Mauritania) provides VCT (Voluntary HIV/AIDS Counselling and Testing) training for laboratory technicians in shared company clinics to reinforce the clinics' human resource capacity. More

details can be found in the chapter "Role of Business Coalitions in the Multi-sectoral response to AIDS".

GBCA (Ghana) trainings

Peer education basic course (five days)

This course equips employees with basic knowledge about HIV/AIDS, as well as teaching and facilitation skills.

Peer education refresher course (three days)

This course updates the knowledge and teaching base of peer educators.

Management of HIV workplace programmes (one to two weeks)

This course is tailored made to meet the needs of individual organizations and can vary in length from one to two weeks. It is mediated through local NGOs with expertise in this area. The course is designed to enhance skills to plan, budget, implement, communicate and monitor an HIV programme. Though the focus is on HIV, the skills taught can be used on any other daily business task. A manual is included.

One-day workshops on various topics

- Care and treatment
- Monitoring and evaluation
- Public awareness

HIV/AIDS in-house trainings for company management staff (one day)

A trainer conducts this one-day training for middle management in the company.

HIV/AIDS Counselling (six weeks)

This six-week course is offered by the government. GBCA will reserve a slot for company participants.

Peer education conference (two days)

Training to Ambassadors (five days)

GBCA also trains ambassadors nominated by founding members to assist in the recruitment drive of the coalition. Training covers basic HIV/AIDS facts, national HIV/AIDS statistics, the Ghana HIV/AIDS workplace policy, information on the GBCA, role of the ambassador, recruitment and selection procedures, planning for recruitment and expectations of prospective members. A manual and CD are provided as part of the training. In 2007, GBCA trained 14 ambassadors who in return commit to assist the secretariat for one year with recruitment of private sector participants.

Reward and recognition

A number of coalitions organize events to reward and recognize the work of the private sector in tackling AIDS. For example, TERI-BCSD (India) rewards and recognizes companies for their business response to AIDS through their Corporate Awards programme. The aim of the award is two-fold. First, to recognize and reward the good work done by these companies to tackle AIDS at the workplace and second, to disseminate their success stories to a larger group of corporates through a TERI-BCSD publication, *Citizens at Work*. The publication aims at further increasing and engaging the private sector through highlighting successful examples. The award has a due diligence component where visits are made to winning companies for the next five years to ensure their programmes are sustainable.

BBCA (Botswana) in 2005 launched an annual competition with the dual objective of sharing lessons and ideas on how to mitigate the impact of AIDS in the workplace and promote monitoring and evaluation. In 2006, the categories included small, medium and large businesses as well as an overall Business Excellence in HIV/AIDS award.

In March 2007, GHARP (Guyana) held its first HIV/AIDS award ceremony together with the Private Sector Advisory Board and Guyana's Ministry of Health. The award ceremony was aimed at honouring outstanding contributions for Excellence in the Workplace, Excellence in the Community, Excellence for Innovation, Excellence Using Core Competency, Individual Leadership on HIV/AIDS, and Individual Care Provider for HIV/AIDS.

New services

Business Coalitions are continually seeking to introduce new activities and services to engage and meet private sector needs. Last year, ABCT (Tanzania) added new services. It has increased its advocacy role through more regular visits to companies. The new website and newsletters also ensure members are kept up to date with ABCT's activities and progress. It offers the same services as before, but now has a pool of trainers, which means rather than relying on other organizations, it can deliver training directly and more efficiently to member companies. A new part-time accountant helps ensure it tracks revenue and

expenditures. However, the biggest change is the new partnerships ABCT has formed to increase its private sector reach. It has partnered with the government to help train minorities on AIDS workplace programmes and also with the Chamber of Commerce to increase country coverage more economically by using the chamber's countrywide offices to reach new members.

Disease area focus

In sub-Saharan Africa, the disease focus of the coalitions is HIV/AIDS. The exception to this is CCA-SIDA (Cameroon) and AECV-B (Burkina Faso), which were both launched to tackle AIDS, TB and Malaria, but currently spend the majority of their time on AIDS work. When Business Coalitions were asked in 2006 about their disease area strategy, many expressed an interest to work in TB, Malaria and even in more holistic wellness programmes as shown in Figure 8. However, coalitions have not found it easy to move into these new disease areas. The data for 2007 shows that none of the coalitions that expressed an interest to work in new disease areas are actually doing so. However, NABCOA (Namibia) is currently conducting an assessment of the private sector to determine its needs in supporting TB workplace programmes.

Most other national Business Coalitions in Asia, Caribbean, Latin America and the Arab region are not interested in extending into disease areas beyond HIV/AIDS. Figure 8 shows that almost all coalitions in Asia focus solely on HIV/AIDS, however, some touch upon other sexually transmitted diseases (STDs) in their trainings. There are two exceptions in Asia: TBCA (Thailand) and MBCA (Myanmar). TBCA started to work in TB 2 years ago. This was the result of a report published by GHI which showed that 28% of business surveyed felt that TB would have an impact on their workforce in the next five years. TBCA discussed this business risk at several government meetings and was subsequently invited by the national TB programme to become part of its technical committee. TBCA assisted this committee in developing a proposal to tackle TB during round six of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). The US\$ 1 million proposal was successful and TBCA now offers TB and HIV components to companies. TBCA is also developing a National Code of Practice on TB management in the workplace together with the ministry of labour.

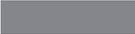
Figure 8 Disease Focus of Business Coalitions in Sub-Saharan Africa

	HIV/AIDS	TB	Malaria	Wellness
Cameroon	Primary	Secondary	Primary	Not working
Burkina Faso (2007)	Primary	Secondary	Primary	Not working
Malawi	Primary	Secondary	Secondary	Secondary
Swaziland	Primary	Secondary	Secondary	Secondary
Uganda	Primary	Secondary	Secondary	Not working
South Africa	Primary	Secondary	Not working	Not working
Mauritania	Primary	Not working	Not working	Not working
Mozambique	Primary	Not working	Not working	Not working
Ethiopia	Primary	Not working	Not working	Not working
Namibia	Primary	Not working	Not working	Not working
Nigeria	Primary	Not working	Not working	Not working
Rwanda	Primary	Not working	Not working	Not working
Tanzania	Primary	Not working	Not working	Not working
Namibia	Primary	Not working	Not working	Not working
Zimbabwe	Primary	Not working	Not working	Not working
DRC	Primary	Not working	Not working	Not working
Cote d'Ivoire	Primary	Not working	Not working	Not working
Mali	Primary	Not working	Not working	Not working
Botswana	Primary	Not working	Not working	Not working
Ghana	Primary	Not working	Not working	Not working
Kenya	Primary	Not working	Not working	Not working

 Primary disease focus of the creation

 Secondary disease focus of the coalition, i.e. active in this disease

 Disease that the coalition is most likely to consider, if any

 Coalition not working on this disease, and is unlikely to

MBCA (Myanmar) is currently the only coalition in Asia that provides information and conducts education sessions on all three disease areas: AIDS, TB and Malaria. TB and malaria sessions are conducted on a request basis, but the greater focus of their work is on AIDS.

IBT (India) would consider working in TB, malaria and other lifestyle related areas in the future.

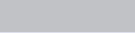
Other national and regional Business Coalitions tend to focus solely on HIV/AIDS. However, APBCA is planning to increase its support to national Business

Figure 9 Disease Focus of Business Coalitions in Asia

	HIV/AIDS	TB	Malaria	Wellness
Cambodia	Primary	Not working	Not working	Not working
Fiji	Primary	Not working	Not working	Not working
India (FICCI-SEDF)	Primary	Not working	Not working	Not working
India (IBT)	Primary	Not working	Not working	Lifestyle related
India (TERI-BCSD)	Primary	Not working	Not working	Not working
Indonesia (NBA)	Primary	Not working	Not working	Not working
Indonesia (IBCA)	Primary	Not working	Not working	Not working
Papua New Guinea	Primary	Not working	Not working	Not working
Myanmar	Primary	On request	On request	Not working
Thailand	Primary	Not working	Not working	Not working
Singapore	Primary	Not working	Not working	Not working
Sri Lanka	Primary	Not working	Not working	Not working

 Primary disease focus of the creation

 Secondary disease focus of the coalition, i.e. active in this disease

 Coalition not working on this disease, and is unlikely to

 Disease that the coalition is most likely to consider, if any

Coalitions by examining the impact of diseases that increase HIV susceptibility (STDs) and the burden on care (TB). Similarly, PCBC plans to extend its work into non-communicable diseases in the future, but currently is focused on AIDS.

Special activities and services provided by Business Coalitions

A number of Business Coalitions offer unique services and activities. A few examples are described below.

TBCA (Thailand) offers companies a standardized assessment of HIV/AIDS prevention and management programmes in the workplace and awards them a Gold or Silver ASO (AIDS-response Standard Organization) certificate depending on how they score in the assessment. The award certificate is co-signed by the Director-Generals of the Thailand Department of Labour Protection and Welfare, Ministry of Labour and the Department of Disease Control, the and Ministry of Public Health. Currently, 4,111 companies in 61 provinces have been ASO certified, directly covering 250,000 employees through a standardized training programme.

ASO Thailand HIV/AIDS workplace programme accreditation

Level 1: assessment of the main policy of the enterprise covering four aspects that must be reflected in the company policy:

1. No compulsory screening of job applicants
2. No compulsory testing for workers
3. No termination of employment on the grounds of HIV/AIDS infection
4. Provision of HIV/AIDS training to workers

Note: Level 1 must be met before level 2 can begin to be assessed.

Level 2: assessment of the enterprise's management of HIV/AIDS in the workplace, which counts for 100 points. If an enterprise has all four components in its HIV/AIDS workplace policy and scores more than 60 points, that enterprise receives an ASO Gold award. If the enterprise scores 25-60 points, it receives an ASO Silver award. Level 2 assessment indicators are:

1. Training of personnel (both employees and management) on HIV/AIDS (25 points)

2. Organization of complementary activities, such as promotion on the use of condoms, creation of HIV/AIDS bulletin boards, inclusion of AIDS issues at meetings, dissemination of AIDS information, etc. (20 points)
3. Maintaining confidentiality regarding employees' HIV status (20 points)
4. Announcement of an HIV/AIDS policy in the workplace (10 points)
5. Social contributions, such as organization of AIDS activities, participation in community events and donations for AIDS patients and their families (five points)

TBCA is currently considering offering a TB certification. Whether this will be combined with their existing ASO certification (ATSO: AIDS TB Standard Organization) or serve as a standalone certification is still to be decided.

Another example is the development of public-private partnerships to deliver treatment in Malawi.

MBCA (Malawi) public-private partnership delivers treatment in Malawi

MBCA has been chosen to coordinate the private sector treatment programme, which has involved working closely with the Malawi Ministry of Health. Started in September 2005 and scheduled to last five years, this programme is embedded within the National ARV Scale-up plan, which includes a component to use the private sector for channelling treatment. While the programme is subsidised, it costs companies US\$ 5 per patient per month. Roles and responsibilities are clearly defined:

- The Global Fund to Fight AIDS, Tuberculosis and Malaria provides funding for the procurement of drugs and training of healthcare workers in the private sector.
- WHO provides operational and administrative costs, including salaries.
- The Ministry of Health, in collaboration with the NAC and UNICEF, procures the drugs for the private sector. Ministry of Health trainers are also using the MBCA programme to train the private sector.
- MBCA identifies private sector companies to become a part of the programme.

This programme is helping to attract new members, because companies understand that it helps them to access the lowest priced medication available.



Egypt Business Coalition (EBC) on HIV/AIDS

Working Groups (WGs)

<p>Region-based Working Group</p> <p>Industry-based Working Group</p> <p>Issue-based Working Group</p> <p>↓↓↓</p> <p>New forms of actions</p>	<p>In March 2008 Members of the EBC will have the opportunity to form WGs to pursue key areas of interest. Potential working groups include:</p> <ul style="list-style-type: none">■ Region-based WGs, for example in Cairo, Alex, Upper Egypt, Delta■ Industry-based WGs, for example, oil and gas, food and beverages, pharmaceuticals■ Issue-based WGs, e.g. Workplace Policy, Training/Education, Care/Treatment <p>Each WG will pursue specific actions related to it region/industry/issue. The WGs will document their actions through reports and conduct their work by convening in discussions groups or expert meetings. This is expected to inform responses to HIV/AIDS that will lead to new forms of action.</p> <p>Member companies can apply to join a WG at any time and be members of more than one WG. In each group, a member will be elected by the other members of the group to chair the WG.</p>
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A third unique activity is being developed by Egypt Business Coalition (EBC) on HIV/AIDS. In March 2008, it plans to establish focused working groups by region, industry and issue. Its members can belong to more than one group. This initiative will increase engagement as companies choose to join groups that are the most interesting and relevant to them. Members in each group will discuss the topic in detail and develop recommendations for new forms of action.

The Role of Business Coalitions in the Multi-sectoral Response to AIDS

Figure 10 Business Coalitions hold relationships at all levels in the multi-secto response to AIDS

International relationships held by BCs	<ul style="list-style-type: none"> International donors and stakeholders e.g. UNAIDS, GFATM, PEPFAR, World Bank, USAID, AUSAID, UNDP, WHO, Bill & Melinda Gates Foundation, GBC, IOE, ITUC ILO, GTZ, GHI
Regional relationships held by BCs	<ul style="list-style-type: none"> Regional Business Coalitions e.g. PABC, PCBC, ABCAR, APBCA Private Sector Other regional and national Business Coalitions International donors and Stakeholders Regional donor programmes e.g. World Bank ACTAfrica, GTZ ACCA, CCA, PharmAccess Regional organizations of the UN system
National relationships held by BCs	<ul style="list-style-type: none"> Government National AIDS Commission (NAC) Ministries of Health, Education, Planning, Labour and other relevant ministries Chambers of Commerce Employer Federations Labour Unions Faith Based Organizations Community Based Organizations Civil Society Private Sector National Business Coalitions in the same or other countries International donors and stakeholders

The Business Coalition response to AIDS takes place at the national, regional and international levels, which helps to ensure that programmes are truly multi-sectoral. Figure 10 captures some of the many relationships Business Coalitions have with other key stakeholders, which allows them to work in partnership to effectively support the private sector and strengthen national and international efforts.

International relationships

Although Business Coalitions exist to serve the private sector, some rely on international donors and stakeholders for funding and technical assistance, especially when they are first establishing themselves. Others apply for international donor funding for specific projects. A number of coalitions submitted applications and received funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria in 2007 including NABCOA (Namibia), NIBUCAA (Nigeria), BBCA (Botswana) and CIELS (DRC). In return, Business Coalitions offer international donors and stakeholders an effective platform from which they can connect with private sector stakeholders and quickly reach a large number of companies.

The UNAIDS Secretariat works with more than 30 national Business Coalitions on AIDS around the world. This is often in collaboration with the ILO, which is the lead agency in UNAIDS for private sector mobilization and workplace policy and programme development.

Regional relationships

A number of national Business Coalitions link into regional coalitions. This relationship gives Business Coalitions the opportunity to share information, explore potential partnerships with other national coalitions in the same region, and contribute to setting regional strategies. This synergistic, mutually beneficial relationship is critical to strengthening both national and regional coalitions to support the private sector response to AIDS.

International donors and stakeholders also support Business Coalitions at the regional level. For example, the GTZ through its ACCA (AIDS Control in Companies in Africa) programme provides the PABC (Pan-Africa Business Coalition) with regional training. This includes the most recent Cost-Benefit Analysis training, held in December 2007. GTZ ACCA's Peer Review Programme enabled 10 national Business Coalitions in sub-Saharan Africa to develop their capacity through learning and sharing information, tools and ways of working.

GTZ Aids Control in Companies in Africa (ACCA) programme

GTZ supports Business Coalitions in Nigeria, Tanzania, Mozambique, Zambia, Namibia, Kenya, Malawi, Ethiopia, Côte d'Ivoire and DR Congo.

Ongoing advice on organizational development through long- and short- term technical assistance is given in the following areas:

- Developing statutes, setting up organizational structure, formulating business plans (long-term strategies and stakeholder analysis)
- Financial planning and budget projections
- Developing feasible yearly action plans
- Applying for international funding

Capacity development through peer learning and exchange

In 2006, GTZ ACCA conducted a self-evaluation as a process of mutual learning. The organization combined peer reviews from business coalitions with capacity development and networking for seven national Business Coalitions in sub-Saharan Africa. GTZ also facilitates annual trainings, which cover topics such as:

- Communication strategies
- Innovative peer education approaches
- HIV, TB and monitoring and evaluation
- Design of community programmes

Joint development of services delivery of business coalitions to their clients and members in the areas of:

- Advocacy
- Information and education materials
- Situational and cost-benefit-analysis
- Training of coordinators, peer educators and management
- Negotiation of a common AIDS fund and insurance
- Reaching out through the supply chain
- Monitoring and evaluation

*Developing and providing tools
Providing small grants*

National relationships

Business Coalitions contribute to national AIDS strategies in a variety of ways. Some coalitions are fully integrated into the national AIDS response such as BBCA (Botswana), KHBC (Kenya) and NABCOA

(Namibia). In Mauritania, CEMA-VIH/SIDA is working with the National AIDS Commission to develop a strategy to train additional laboratory technicians and counsellors within inter-company clinics to increase the availability of voluntary counselling and testing (VCT) services within the private sector. This partnership-driven strategy will bolster national efforts to reach the country's goal of 10% of private sector employees tested for HIV by 2009.

In Ghana, the GBCA was selected in 2007 to sit on the board of the Ghana country coordinating mechanism of the Global Fund to fight AIDS, Tuberculosis and Malaria. FUNDEC-VIH (Guatemala) identified which parts of the Guatemala National AIDS Strategic Plan it fits into as a private sector entity. FUNDEC-VIH was very specific in selecting its mission and activities to ensure it addressed the goals set forth in the national strategic plan.

BBCA (Botswana) operates within the context of the National Strategic Framework

The Botswana Business Coalition on AIDS (BBCA) operates within the context of the National Strategic Framework (NSF) 2003-2009. It promotes the message that the private sector must ensure that all companies engaged in business in Botswana apply the Minimum Internal Package (MIP), which outlines nine minimum requirements that companies should aim to fulfil:

1. Undertake an intensive promotion campaign and link staff to VCT services by establishing institutional partnerships with VCT service providers
2. Ensure condom availability and accessibility in all central and district offices and intensively promote their use
3. Ensure staff awareness of all relevant HIV/AIDS programmes, including HBC/OVC, PMTCT and ART/TB and facilitate linkages with the programmes to increase access
4. Develop and implement targeted Behaviour Change Information Communication with all staff to support relevant national programmes, especially VCT
5. Collect and disseminate routine information on absenteeism, morbidity and mortality using a human resource database system and submit the appropriate reports to ministry management and NACA
6. Provide access to counselling services for all staff cadres

7. Develop HIV/AIDS strategic documents including an organizational profile and annual Action Plan; mainstream HIV/AIDS into the organization's overall strategic plan
8. Ensure appropriate workplace policies are in place and enforced
9. Establish a sector budget line for both internal and external HIV/AIDS programmes

The guiding principle of the organization is to become actively involved in a multi-sectoral effort that not only addresses issues of self-interest from a business perspective, but also complements the government's efforts in formulating a workable and sustainable solution that contributes to an improved general quality of life and standard of living, which in turn encourages social and economic development.

International organizations have been instrumental in establishing and supporting national Business Coalitions. For example, The Sudanese Business Coalition against AIDS (SBCAA), launched in early 2006 by group of prominent private sector companies, is primarily supported by the UNAIDS Secretariat and UNDP, which provide technical and institutional support to enable SBCAA to play effective role. The coalition is:

- Developing and implementing a strategy for scaling up private sector involvement in the national response
- Facilitating public-private partnerships within the framework of the HIV national response
- Acting as an advocacy body for mobilizing more private sector partners

Other national relationships include connecting with community- (CBO) and faith-based organizations (FBO) such as JaBCHA (Jamaica) with the Jamaica Network of Seropositives (JN+).

In addition to a strengthened relationship with the government, international aid agencies and civil society, Business Coalitions provide an avenue for the private sector to strengthen its relationship with the local and international NGOs and civil society. As a result of the development of CONAES (Mexico), a network of Mexican AIDS NGOs was formed - Impulso. This network has emerged as a highly-skilled provider of technical assistance to the private sector in policy development, reducing stigmatization, and disseminating best practices. Impulso is based in Mexico, but the network has shared its expertise and

lessons learned with coalitions in Jamaica and Guatemala.

Business Coalitions have developed strong working relationships with multinational companies to reach out to national SMEs. For example, SABCOHA is working with Volkswagen SA and Eskom to implement AIDS workplace programmes within their supply chain companies. Standard Chartered Bank Tanzania is partnering with ABCT (Tanzania) to provide their SME banking customers support in developing HIV workplace programmes. BBKA (Botswana) is working with Stanbic and BCL Mine to reach suppliers and contractors, particularly SMEs with workplace programmes. TBCA (Thailand) is currently working with Chevron and Shell in HIV and AIDS training and community outreach programmes.

■ Key Business Coalition Partnerships and Relationships

Business Coalitions around the world have formed a number of strong relationships and partnerships with key stakeholders in the private sector, the national government and civil society groups. In some cases, these stakeholders have played a critical role in creating and launching Business Coalitions. The development of key relationships and partnerships have enabled Business Coalitions to better serve the private sector in tackling AIDS and in some cases, act as the country focal point for international organizations, such as the UNAIDS Secretariat.

This section describes the work of some of these key players who are at the same time close partners of the GHI. These stakeholders have formed relationships and partnerships that have been influential in the establishment and ongoing support of Business Coalitions whether through technical assistance, advocacy, lobbying, funding or networking opportunities.

The following organizations are included in this section: UNAIDS, World Bank, GHI, ILO, GTZ, Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC), The Corporate Council on Africa (CCA), PharmAccess Foundation, SIDA-ENTREPRISES and Constella Futures.

Business Coalitions and international organizations

The World Bank, GHI and UNAIDS launched a private sector and HIV/AIDS programme joint strategy and work programme in 2000. The partnership provided a great variety of resources to companies, associations, organizations and countries to address the emerging challenges of bringing together private sector interests with public sector focus and national HIV/AIDS strategies.

Shortly after becoming a UNAIDS cosponsor, ILO joined the World Bank/GHI/UNAIDS partnership for private sector mobilization, helping to organize a number of sub-regional meetings that gave rise to the creation of several national Business Coalitions in Africa and in Asia. The ILO currently works with 11 national and three regional/sub-regional coalitions and is the lead agency in UNAIDS for private sector mobilization and workplace policy/programme development. The ILO's main partners are UNDP and UNESCO, but is associated with the entire UNAIDS family as appropriate.

By 2006, several other organizations joined the group, including GTZ (working directly with 12 coalitions in Africa), the Corporate Council on Africa and the PharmAccess Foundation (each providing direct assistance to five African coalitions), SIDA-ENTREPRISES and others, to reach out to some 30 countries across Africa. Together, they replicated the strategy of supporting and in some cases building Business Coalitions to address HIV/AIDS throughout Asia, the Caribbean, and the Middle East and North Africa.

The World Bank/GHI/UNAIDS private sector strategy for working with the public and private sector on AIDS has always included as many stakeholders as possible. The World Bank provides funding across Africa through the Multi-Country HIV/AIDS Program, as well as some on the ground technical assistance and capacity building. However, in all countries, the strategy is to engage with as many donor agencies, international groups, companies, unions, associations, NGOs and interested organizations as possible to create a national constituency that supports and works on issues relating to the private sector and HIV/AIDS.

UNAIDS has complimented these activities by providing, in many cases, a coordination role and follow-up support for the technical assistance, lending a greater amount of sustainability to efforts throughout the region. GTZ has been a critical partner in providing long-term support on the ground in key countries, together with funding and support for strategic planning. The CCA and the PharmAccess Foundation have provided people and expertise to national and regional efforts to build institutional capacity of coalitions, keep communication going and facilitating plans for long-term funding options for the coalitions.

The GBC's National Connections Initiative supports national Business Coalitions that are associated with effective public-private partnerships and are good local implementing partners to GBC member companies. It seeks to provide advocacy, specialized services and access to a network of over 200 leading companies from around the world. GBC believes the extensive synergies between global and national efforts effectively buttress and improve the scale and quality of current private sector programmes. This initiative seeks to foster closer alignment at the global, regional and national levels.

SIDA-ENTREPRISES is a network of MNCs involved in the fight against AIDS and STDs. It provides technical support to members, promotes exchange of experiences between companies and between countries, and works towards the sustainability of the programmes. Its actions are in line with those undertaken by the authorities in the individual countries, civil society and international agencies. SIDA-ENTREPRISES strongly advises the subsidiaries of member companies to join national Business Coalitions, if there are any, or encourages them to set one up. The network has been involved in establishing coalitions in Cameroon (2004), Mali (2005), Morocco (2006) Burkina Faso (2007) and is currently assisting Benin.

Constella Futures and the AIDS Responsibility Project, through USAID's Health Policy Initiative, provide ongoing technical assistance in the development of Business Coalitions in Mexico, Jamaica and Guatemala. USAID provided seed funding in all three countries and Merck Sharp & Dohme provided additional seed funding in Jamaica. Through the Health Policy Initiative, USAID has allocated funding for the development of these sustainable coalitions and for capacity development with local organizations, including NGOs and foundations, as well as government entities such as the Guatemalan Institute of Social Security (IGSS). The objective is to improve the ability of local organizations to provide HIV services to the private sector, such as workplace policy development, situational analyses and programme implementation.

Finally, the GHI has been a critical partner in providing a bird's-eye view of the state of joint efforts, particularly with respect to the Business Coalitions - where they are, where they are going and what they need to get there. The GHI has been a catalyst for a number of partnerships between the private sector and Business Coalitions through advocacy, awareness and establishing direct partnerships. In combination, agencies and organizations dedicated to supporting efforts to address HIV/AIDS either with or through the private sector, have demonstrated that by working together, they are able to assist with nationally driven, sustainable Business Coalitions.

Working together – benefits to international organizations

The international organizations discussed are working collaboratively to ensure the development of a comprehensive and multi-sectoral response to the AIDS epidemic. Business Coalitions provide a vehicle for mobilizing the private sector because of their ability to reach a large number of companies and leverage various private sector activities to contribute to the national response.

For example, Business Coalitions help to support the development of workplace prevention education programmes as well as initiatives that provide access to care and treatment, whether directly at the workplace or indirectly through 'know your status' campaigns, referral systems and health insurance. Workplace policies help counter discrimination and stigmatization, and community outreach is expanding through public-private partnerships and the inclusion of supply chains and other contracting arrangements.

Business Coalitions are also an effective vehicle for international organizations to connect the private sector with other stakeholders, particularly National HIV Programmes, trade unions and employers' representatives.

Working together – benefits to Business Coalitions

Relationships with international organizations provide Business Coalitions with the ability to continue to develop their capacity, extend their reach and activities and become significant stakeholders in the national AIDS response. International partners can provide access to contacts and broker public-private partnerships, including relationships with donors. They also use their experience working with the private sector in other countries to provide technical support to coalitions in a number of areas, such as strategic planning, institutional capacity building, membership recruitment and development of services, as well as monitoring and evaluation systems.

International partners can also undertake certain initiatives jointly with the coalitions such as World AIDS Day and training activities. Such partnerships can be particularly effective in terms of raising the profile of the coalition on national and international levels. Alignment with an international organization can also



help to facilitate coordination between the National AIDS Commission and a Business Coalition and encourage the development of a national workplace policy, the inclusion of a private sector component in the national AIDS strategy, and a monitoring and evaluation framework with impact indicators that specifically speak to the efforts of the private sector.

UNAIDS

The UNAIDS Secretariat supports existing Business Coalitions through providing technical oversight, advocacy and strategic financial support. Technical oversight activities entail assisting in the coordination of workplace programmes and advocacy activities, reviewing monitoring reports and evaluation of progress, strategic guidance on business plans and activities, and participating in the review panel for business awards.

Advocacy activities include advising on current developments on HIV issues, identifying opportunities to strengthen the visibility of the coalition, and introducing stakeholders involved in the national response. UNAIDS provides financial support for the employment of People Living with HIV and for Business Coalition members to participate in key strategic regional HIV Private Sector meetings. It also assists coalitions to attract external resources from donor agencies and multilateral funding mechanisms, such as the Global Fund on HIV/AIDS, the PEPFAR, the World Bank's Multi-Country AIDS Program and the German Development Agency GTZ.

The World Bank

The World Bank provides funding across Africa through the Multi-Country HIV/AIDS Program, as well as some on-the-ground technical assistance and capacity building. The World Bank's core competencies include the ability to influence policy decisions at the national and global level, offer traditional and innovative financing options, and convene and mobilize public and private stakeholders to develop a coordinated response to AIDS.

GHI

The GHI supports Business Coalitions in three ways:

- Advocacy. Through developing and distributing reports such as this one to raise awareness of Business Coalitions and the work they do, raising awareness at World Economic Forum Meetings through private events, and speaking about

Business Coalitions at international and national conferences

- Catalysing partnership such as the first regional Business Coalition teleconference in November 2007, as well as partnerships between Business Coalitions and the private sector to engage SMEs, such as with BBKA (Botswana) and ABCT (Tanzania)
- Providing information such as individual profiles for all known regional and national Business Coalitions

ILO

Partnership with the ILO brings the specific advantages of its workplace-related experience, standards and structures that it can share to help ensure relevance, sustainability and worker ownership and buy in of workplace AIDS programmes. Guidance is available in the form of direct technical assistance and practical handbooks, toolkits and factsheets adapted to different economic sectors (for example transport and construction), actors (for example employers and factory inspectors) and types of enterprise (for example, a handbook for small and micro enterprises).

The TBKA (Thailand) reports that ILO support has provided «immeasurable benefit» in that the ILO Code of Practice has been used as the basis for national Codes of Practice supported by the Ministries of Labour in many member states. In Thailand, TBKA has implemented the national code through the ASO programme that covers the entire country of 76 provinces. This programme would not have been possible without support from the Ministries of Labour and partnership with ILO.

GTZ

The development of necessary organizational structures is GTZ's core responsibility. Business Coalitions and associations are supported in setting up efficient and sustainable human resources, financial and IT structures. GTZ experts support the process of annual planning and budgeting activities, as well as the development of medium-term business plans. It also provides training in project development, the project management cycle and human resource management. GTZ assists coalitions to establish a monitoring and evaluation system to improve performance.

For example, GTZ executed a peer review exercise with representatives of Business Coalitions, a business

association and companies from six countries to evaluate the performance and services of the business associations and the implementation of the HIV workplace programmes within the companies.

GTZ provides workshops to conduct effective information sessions and training activities aiming at convincing and preparing managers and employees to develop HIV policies and programmes in their companies. Training offered by GTZ enables the coalitions to offer services themselves such as cost benefit analysis, peer education training, monitoring and evaluation training, guidance on how to plan and conduct Knowledge, Attitude, Practice and Behaviour and baseline surveys, as well as how to help member companies find the best service providers for their individual needs.

Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC)

GBC believes the extensive synergies between global and national efforts improve the scale and quality of current private sector programmes. This initiative seeks to foster closer alignment at the global, regional and national levels. The GBCs National Connections programme seeks to build on the work of the World Bank, the Global Health Initiative (GHI) of the World Economic Forum and UNAIDS, which have been working together for the past six years to assist the establishment of national Business Coalitions on AIDS. GBC National Connections especially supports coalitions that meet and follow the Guidelines for Building Business Coalitions, jointly released by World Bank, GHI and UNAIDS in November 2004.

In 2006, to further support this work, GBC established a regional office in Nairobi to lead the GBC National Connections programme. The Nairobi office is supported by GBCs offices in Johannesburg and Paris in programme implementation and roll-out in Southern Africa and Francophone Africa respectively. Also supporting the initiative at a global level are GBCs offices in New York, Beijing, Geneva, the Ukraine and Moscow.

CCA

The CCA HIV/AIDS Initiative provides support to nascent and established Business Coalitions through direct technical assistance, facilitation of public-private partnerships and advocacy. Specifically, it assists coalitions to strengthen human resource capacity,

develop short and long-term strategic plans and identify potential partners for technical and financial support.

CCA also provides access to private sector resources, tools and best practices for development of coalition member services. It works to facilitate linkages between private sector companies, employer federations, trade associations, governments, community-based and international organizations. For example, CCA is currently facilitating the development of national and regional communication networks for Business Coalitions in real time using open source technology in collaboration with AllAfrica Global Media.

CCA supports a multi-sectoral approach to AIDS and works to promote the integration of the private sector response into the national AIDS strategy.

PharmAccess Foundation

PharmAccess, like CCA, also provides support to nascent and established Business Coalitions through direct technical assistance, facilitation of public-private partnerships and advocacy.

Future strategies for international organizations and Business Coalitions

UNAIDS

The UNAIDS Secretariat strategy will continue to strengthen its existing relationships and develop new relationships with Business Coalitions to guarantee sustainable resources for a long-term AIDS response. UNAIDS Secretariat will focus on achieving a more inclusive representation of all sectors (formal and informal, large and small businesses, unions and federations), enhancing the financial sustainability of Business Coalitions, and intensifying their contribution to the national AIDS response.

The World Bank

The World Bank, in partnership with UNAIDS, GHI, GTZ, CCA, PharmAccess and others, will continue to leverage financial, technical and human resources to support initiatives that address HIV/AIDS and the private sector.

GHI

The GHI will continue to work in partnership with World Bank, UNAIDS, GHI, GTZ, CCA, PharmAccess



Foundation, GBC, SIDA-ENTREPRISES and others to advocate for and strengthen Business Coalitions. It will also catalyse partnerships between Business Coalitions and the private sector and provide a source of up-to-date information on regional and national coalitions.

ILO

The ILO will continue to encourage and support its social partners – employers’ federations and trade unions - at country level to contribute to the success of existing Business Coalitions and the creation of new ones. ILO offices and constituents will also continue to share their strategies, policy advice, technical support and the extensive guidelines that have been produced for workplace action. Given that many companies that join a Business Coalition are probably also members of the employers’ federation, ILO could work with coalitions to develop a consolidated training programme.

Other ILO interventions may be outside the workplans of most coalitions, but they will hopefully contribute to establishing a conducive environment for Business Coalition development. This includes the revision of labour laws to prohibit discrimination, the development of national level policies on AIDS for the workplace, and the extension of workplace activities into the community through outreach programmes that include employment opportunities for those living with HIV.

GTZ

GTZ’s future strategy is to incorporate the Pan-African Business Coalition Against AIDS into existing Business Coalition relationships to increase exchange, mutual learning, reduced production costs and to achieve a minimum quality standard of workplace programmes. Another major focus in future will be strengthening the capacity of Business Coalitions to deliver requested services to their member companies. GTZ will also support SMEs through Business Coalitions with secured funding from donors for this target group.

GBC

The GBC National Connections programme’s objective is to support the increased range and depth of private sector efforts against AIDS, TB and malaria. The programme also aims to organize businesses at the national level, partnering and providing leadership to national business response strategies and facilitating linkages with other global private sector

efforts. Through the GBC National Connections programme, national Business Coalitions receive:

- Recognition as a formal partner of the GBC and profiling on GBC’s website
- AIDS, TB and malaria technical support and capacity building guidance from relevant GBC regional directors
- Networking with international donor organizations through GBC network and events, leading to opportunities to develop partnerships
- Participation and collaboration in relevant regional GBC events and meetings
- Networking with GBC’s network of over 200 international member companies and key partner organizations through various GBC initiatives and events
- Networking with the Global Fund Private Sector Delegation through GBC’s role as the Global Fund private sector focal point, and the opportunity to contribute to the Global Fund board policy consultations
- Connection to the wider community of national and regional business coalitions in Africa, Asia, Latin America and the Caribbean

CCA

The CCA HIV/AIDS Initiative will seek to strengthen its relationships with the coalitions in DRC, Ghana, Mali and Mauritania and international organizations working to mobilize the private sector response to AIDS in Africa. CCA will also continue to support other African coalitions, including the PABC, and provide technical support to African National AIDS Commissions interested in creating new Business Coalitions.

In the near future, CCA will continue to support a pilot activity to adapt a communications platform for the DRC coalition using open source technology. This platform will enable more effective exchanges between coalition representatives in the regions. Using experiences gained from the pilot activity, CCA plans to work with AIAfrica and AIDS Portal to expand the tool to other African countries. The activity will also serve as a basis for the development of a website and communications platform for the PABC.

PharmAccess Foundation

In addition to continuing its existing activities and programmes, PharmAccess will focus its efforts on advocating supply chain initiatives, whereby large multinational companies or national companies with a

strong workplace programmes in place can support SMEs in their supply chains to establish HIV/AIDS programmes by sharing knowledge and lessons learned. PharmAccess can also provide technical assistance and organize workshops for SMEs.

Contact list of international organizations

UNAIDS Secretariat

For any query related to Business Partnerships and Business Coalitions at country level please Contact UNAIDS Country Offices or the UNAIDS Private Sector Partnerships Team at the UNAIDS Secretariat Headquarters in Geneva as below:

Regina Castillo

Tel.: +41 (0)22 791 4244

E-mail: castillor@unaids.org

Fax: +41 (0)22 791 4179

Contact information (including a contact person) for each UNAIDS Country Office can be found on www.unaids.org (Section on regions.)

World Bank

Elizabeth Ashbourne

Results Secretariat, OPCS

World Bank

Washington DC, USA

Tel.: +1 202 458 5247

Fax: +1 202 522 7396

E-mail: Eashbourne@worldbank.org

GHI

Global Health Initiative

World Economic Forum

91-93, route de la Capite

1223 Geneva - Switzerland

Tel.: +41 (0)22 869 1212

E-mail: globalhealth@weforum.org

www.weforum.org/globalhealth

ILO

The UN Theme Group or Joint Team on AIDS is the focus of consolidated action by the UN, and can be contacted through the UNAIDS Country Coordinator or the UN Resident Representative. It is better for the relationship to be with the team as a whole rather than with individual organizations – this ensures a more coordinated approach and gives the Business Coalitions then benefit of a broader range of expertise. The relevant global web addresses are: www.unaids.org, www.ilo.org/aids.

GTZ

Contact the ACCA team at GTZ Head Office in Germany AIDS Control in Companies in Africa ACCA Elisabeth Girrbaach, Teamleader of the regional

programme ACCA

Tel.: + 49 6196 79 1918

Fax: +49 6196 79 80 1918

Elisabeth.Girrbaach@gtz.de;

GBC

Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC)

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CCA

For any inquiry related to business coalition or public-private partnership development, contact:

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The Corporate Council on Africa

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E-mail: vbarnes@africacncl.org

Fax: +1 202 835 1117

PharmAccess Foundation

Business Coalitions may contact the PharmAccess country offices in Tanzania, Nigeria and Namibia, or contact the international office based in Amsterdam:

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PharmAccess Foundation

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USAID – Health Policy Initiative

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■ The Impact and Value of Business Coalitions

The impact and value of Business Coalitions is demonstrated by the number that exist today. Collectively, 47 national Business Coalitions have already reached a staggering 1.088 million organizations with HIV and AIDS programmes ranging from advocacy and awareness to education, training, testing and treatment programmes to monitoring and evaluation systems. This chapter looks at 10 ways in which the impact and value of Business Coalitions can be assessed. It is by no means an exhaustive list.

Success stories to share

Business Coalitions are making a tremendous impact at the national level and many have a number of success stories to share. For example, NABCOA (Namibia) is reaching 15% of the formal economy in Namibia through its 65 members, which represents 28,250 employees out of 200,000 formal workers including 90,000 government employees.

MBCA (Myanmar) has reached 150 businesses, which has an impact on 40,000 workers and their families as well as mobile workers in mining and fishing industries. The employees are receiving education, workplace programmes and information on access to testing and treatment services. A further 100,000 are estimated to have benefited indirectly from peer educators and trainers trained through MBCA community programmes.

CONAES (Mexico) has reached more than 150,000 people, including its employees and their families within their 28 member companies. GHARP (Guyana) reached 60,000 workers and their families through its 43 member companies in partnership with other NGOs and faith-based organizations. TBCA (Thailand) has certified 4,111 companies in 61 provinces covering 250,000 employees on AIDS workplace prevention and management programmes. Other Business Coalitions have similarly impressive stories to tell.

Assessing the impact and value of Business Coalitions

1. Advocating for action

Organizing and participating in meetings and conferences. Business Coalitions use a variety of methods to advocate for action. This can be

through arranging conferences to gather key national and international stakeholders, specifically in the private sector to take action. For example, TERI-BCSD (India) organized a national HIV/AIDS seminar that was attended by more than 100 participants from the private sector, government, NGOs, and international and research institutions. The aim of the seminar was to build awareness of the private sector response to HIV/AIDS. Such seminars and conferences help raise awareness, further engage the private sector and lead to action.

Developing advocacy material with wide stakeholder input. Forums that bring together stakeholders from a variety of backgrounds allow Business Coalitions to develop and review material that can be used to further engage the private sector and permits experienced international partners to provide their input. For example, EBC on HIV/AIDS (Egypt), in cooperation with UNAIDS, UNODC, ILO, Care and Egypt's Ministry of Health and Population, launched the first *Partnership Menu on HIV/AIDS* in the Middle East and North Africa region. This menu is a document providing a brief overview of the various activities aimed at HIV/AIDS prevention and impact mitigation, including the financial burden of the disease.

Advocating through diverse media channels. Business Coalitions use a variety of channels to reach the private sector including television, radio, newspapers, advertisements and newsletters. Newsletters are common among a number of coalitions, such as JaBCHA's (Jamaica) a monthly newsletter and SABCOHA's (South Africa) monthly editorial in *Leadership and HIV/AIDS*. Other Business Coalitions such as ZBCA (Zambia) regularly participate in radio shows and CIELS (DRC) has appeared on television. UBC-HIV/AIDS (Uganda) conducted mass HIV/AIDS awareness campaigns using billboards, radio and television programmes and promotional materials as part of an informal sector programme in 2004 through a strategic partnership with the Norwegian Agency, NORAD.

NIBUCAA (Nigeria) continues to make significant media appearances through the radio, television and newspapers to encourage more members to be active – particularly in commemoration of special events such as the World AIDS Day.

JaBCHA (Jamaica) executive committee members have appeared in a variety of radio and television programmes to talk about the issue, provide the public with additional information on the coalition and discuss how stigma and discrimination affects the workplace.

Conducting specific World AIDS Day events.

Almost every Business Coalition on AIDS develops a specific programme for World AIDS Day. Business Coalitions have successfully used this opportunity to engage key senior private sector figures such as CEOs and financial directors to publicly test for HIV/AIDS. ECoSIDA (Mozambique) encouraged 26 CEOs and CFOs of large and medium sized companies to be tested in front of media and employees in the presence of 60 companies. The event was shown on national television to persuade all employees to get tested. AFBI (Barbados) planned a similar event for World AIDS Day 2007 where 40 business leaders were publicly tested.

2. Engaging the private sector

Engaging additional members. Business Coalitions use private sector membership numbers as an indication of their impact, although some companies are more active than others. In cases of coalitions without members, the companies the coalitions have worked with are considered to be their members. Many coalitions have ambitious plans to increase membership. SABCOHA's (South Africa) vision is to double membership to 80 by 2010, ZBCA (Zambia) plans to increase from 60 to 120 by 2008 and ECoSIDA is committed to significantly increase its membership from 43 members to 100 by the end of 2008. EBC-HIV/AIDS (Egypt) has the very ambitious goal of making every private sector organization in Egypt a member. Through national chambers of commerce and employer federations, some Business Coalitions have access to an extensive list of companies which they can potentially, and in some cases already, provide support with HIV and AIDS programmes. Such examples include CEN (Brazil) whose three national Business Federations provide access to an additional 1,700 companies. (Industry: 500, Transportation: 700 and Commerce: 500 companies). CONAES has worked with all these companies over the last three years on HIV and AIDS workplace programmes.

Engaging SMEs. Although most Business Coalitions strive to incorporate SMEs into their activities, coalitions around the world have found it particularly challenging to engage this sector. Even when they succeed in engaging SMEs, the coalitions do not always have the additional resources and funding to serve their needs, which are quite different than those of larger national and multinational companies. Tiered membership models have helped to bridge this gap, although there is still room for improvement.

BCHA (Swaziland) has 20 large member companies and 60 SME members. Other Business Coalitions are also making progress. For example, BBKA (Botswana) has developed a strategy for engaging SMEs through the BizAIDS programme (www.sabcoha.org/projects/bizaids-2.html) with funding from BOTUSA. Currently BBKA is developing a contractual agreement between BBKA, BizAIDS and IESC (www.iesc.org) to implement the BizAIDS programme in Botswana. The implementation of BizAIDS programme deliverables form part of the BOTUSA/BBKA Country Operational Plan for 2008; activities are scheduled to commence in February 2008. NIBUCAA (Nigeria) is partnering with GTZ/ACCA, Partners Against AIDS, USAID-ENHANSE and the Global Fund to Fight AIDS, Tuberculosis and Malaria to reach out to member companies' supply chains with HIV/AIDS Workplace Programme and Policy development initiatives.

Acting as the private sector focal point for the National AIDS Commission. Some Business Coalitions are expected to serve their members as well as coordinate the private sector component of the national AIDS strategy. This includes reaching out to the informal sector and other priority sectors that may not be coalition members and acting as the sole representative of the private sector at the government level. CBCA (Cambodia), CSP (Mali) and GBCA (Ghana) all have this dual responsibility. NIBUCAA (Nigeria) is a co-chair of the HIV/AIDS Public-Private Partnership Forum at the national level and the president of the Assembly Table of ECoSIDA (Mozambique) chairs the Country Coordinating mechanism of the Global Fund to Fight AIDS, Tuberculosis and Malaria.



3. Conducting education and awareness activities at the workplace

Educating and creating awareness at the workplace. All Business Coalitions perform this activity, whether it be through educating senior management to take action in the workplace to minimize their business risk or educating both managers and workers. Some Business Coalitions use innovative ways to engage staff such as interactive games and role playing, which is used in by the BCAS (Singapore).

4. Supporting the private sector to develop HIV and AIDS workplace policies

The majority of Business Coalitions work to support members in the development and implementation of workplace policies. For example, CBCA (Cambodia) plans to support organizations in developing and implementing compulsory HIV/AIDS policies as mandated by the government in partnership with local technical experts. BCAS (Singapore) already helps companies develop workplace policies as does BCHA (Swaziland), PNG BAHA (Papua New Guinea) and a number of other coalitions. JaBCA's (Jamaica) Workplace Policy Development tool is described in the chapter "Activities and Services of Business Coalitions".

ECoSIDA (Mozambique) has an agreement with the Health Policy group of Constella Group, INC supported by USAID-PEPFAR, to provide training in HIV and AIDS policy design. Training is delivered to dedicated service providers (NGOs) who under the guidance of ECoSIDA help companies to develop their HIV and AIDS workplace policies. As a result, 35 companies now have developed and implemented HIV policies in the workplace.

5. Training private sector staff

BCAS (Singapore) has worked with and trained employees in nearly 80 companies providing technical guidance on HIV/AIDS workplace management, education and awareness programmes through interactive games, policy development and training trainers. Trained organizations include MNCs such as Bristol Myers Squibb, MTV Asia and The Bodyshop, as well as smaller local organizations such as the Changai prison wardens. CONAES (Mexico), JaBCHA (Jamaica) and FUNDEC-VIH (Guatemala) offer their members an economic and demographic model

designed by Constella Futures to help managers analyze how HIV affects their business and develop a specific training curriculum for companies based on the outputs of the model.

GHARP (Guyana) helped build the capacity of its private-public sector partners by training 11 focal persons to develop HIV/AIDS workplace programmes to implement their workplace HIV policies. Five companies have since presented their draft programmes to GHARP, which has subsequently provided guidance in relation to the next steps.

6. Providing access to testing and treatment services

A number of Business Coalitions provide information on how to access testing and treatment and some have been able to offer this service to its members. The BCHA (Swaziland) invested in a mobile VCT service with funding from NERCHA via the Global Fund, which allowed them to offer free testing to the private sector. The funding enabled the purchase of mobile VCT vehicles, a coordinator vehicle, test kits, four salaries for nurses and other operational costs. In collaboration with Total Nigeria PLC, NIBUCAA (Nigeria) with technical assistance from the Global HIV/AIDS Initiative Nigeria (GHAIN), a PEPFAR-supported project, carry out mobile VCT at select TOTAL gas stations in Nigeria. Another example is IBT (India), which facilitated the set up corporate ART centres in six high prevalence states.

Corporate Anti-Retroviral Treatment (ART) centres facilitated by IBT/CII

IBT/CII took up the task of advocating with industry and facilitating the setting up of corporate ART centres in the six HIV/AIDS high prevalence states, under the aegis of the Global Fund Round 4 Access to Care and Treatment Project. The corporate ART centres are the first of their kind anywhere in the world where companies, not in the business of healthcare, have as part of a CSR agenda initiated ART facilities to benefit the community. The facilities have augmented the national programme of providing ART to a large number of patients. In keeping with the spirit of PPP, IBT/CII advocated with the National AIDS Control Organisation to

agree to provide free ARVs, rapid test kits and opportunistic infections (OIs) at the corporate ART Centres. IBT/CII has developed service delivery models for different kinds of corporate health facilities that can be adopted by companies interested in setting up ART Centres. IBT/CII provides information and technical help on setting-up ART Centres, assists in obtaining all necessary permissions and licenses required, facilitates training of human resources, creates linkages with all stakeholders (including PLHA groups) for establishing a patient referral network, sets up patient support services, and assists the ART Centre to be accredited by NACO.

Models of corporate ART centres

The first-of-its-kind, stand-alone corporate centre has been set up by ACC Limited at Wadi Distt. Gulbarga, Karnataka. The centre is a NACO designated ART centre. The centre is providing quality testing, counselling and treatment (OIs) services for HIV/AIDS to the community. Ballarpur Industries has set up an ART Centre at Ballarshah, Distt. Chandrapur, in Maharashtra. The centre is a NACO-designated ART Centre. Other centres in the pipe line include: ACC with CMC, Vellore in Vellore and Tamil Nadu. Godrej & Boyce Manufacturing Co Ltd is setting up an ART Centre at Godrej Memorial Hospital in Vikhroli, Mumbai. Reliance Industries is setting up a centre in Patalganga, Maharashtra and Bajaj Auto is looking to set up a centre in Pune.

7. Developing partnerships to support increased action

In countries where other organizations are also working on HIV/AIDS, Business Coalitions sometimes take the lead in coordinating efforts to avoid duplication and create greater impact. ZBCA (Zambia) has formed a partnership with ZWAP (Zambia Workplace AIDS Partnerships), an umbrella organization that brings together 10 implementing institutions. CIELS (DRC) has established a partnership with CCA and AllAfrica Global Media to adapt an Internet-based communication platform to facilitate communication and resource sharing between the central CIELS office in Kinshasa and its offices in the provinces. ECoSIDA (Mozambique) has appointed a few Economic Associations in the country through which they manage ECoSIDA Programme in the provinces. The Economic

Associations act as facilitators and implement the programme on behalf of ECoSIDA.

JaBCHA (Jamaica) hosted an AIDS Leadership Breakfast in Kingston, Jamaica to commemorate World AIDS Day 2007. During this event the newly-elected prime minister, JaBCHA Chairperson and Jamaica Employers' Federation president, signed a Commitment in Action advocacy document, which obligates signatories to act as a high-level leadership advocate on AIDS in their respective organizations and to commit to a multi-sectoral response to AIDS in Jamaica.

8. Cost Benefit Analysis, monitoring and evaluation

To demonstrate the impact of taking action versus not taking action in the workplace, Business Coalitions offer tools such as Cost Benefit Analysis (CBA) and monitoring and evaluation frameworks. These tools allow the private sector to communicate the difference they are making both internally to senior management and staff as well as externally to their stakeholders and the wider business community. Such programmes are offered by KHBC (Kenya).

Coalitions also work to promote the basic advantages of taking action to companies. As CEN (Brazil) encourages companies to take action against HIV & AIDS by highlighting the advantages of doing so, it also recognizes and rewards companies for their efforts. Since 2005, it has run an annual award ceremony to recognize the private sector's efforts in the micro, small, medium and large company categories.



CEN (Brazil) HIV & AIDS prevention programmes – advantages for companies

Greater employee satisfaction
Increased ability to retain professionals
Increased attraction for new talent
Better return on training investments
Cost rationalization

Improved work environment
Increased interaction between the company, employees and the community
An opportunity to demonstrate social responsibility

CEN rewards companies annually for their efforts in tackling AIDS at the workplace

Awards	October 2005	October 2006	October 2007
Micro	Hotel Costa Mar – Maceió/AL	GREIF –Embalagens Industriais do Amazonas Manaus/AM	ELM Marketing Editora Médica Ltda. São Paulo/SP
Small	Darthe Ind de Plástico LTDA – Caxias do Sul/PA	Makro Atacadista S.A. – Maceió/AL	Ferrovias Tereza Crsitina S.A. Tubarão/SC
Medium	Laboratório Sabin do Brasil – Brasília/DF	Elimar Prestadora de Serv. Gerais- Maceió/AL	Limpel Limpeza Urbana Ltda. Maceió/AL
Large	AR Filho Supermercado Fortaleza – Macapá/AC	Hospital de Clínicas Porto Alegre – RS	Produtos Roche Químico e Farmaceuticos S.A. São Paulo/SP

9. Supporting the private sector beyond HIV/AIDS

Supporting Business beyond HIV/AIDS. Some Business Coalitions are supporting the private sector to tackle not only AIDS, but also TB and malaria. For example, CCA#SIDA (Cameroon) was established to support private sector efforts to address all three disease areas, and KHBC (Kenya) recently introduced TB programmes.

In the private sector, an increasing number of companies are introducing wellness programmes into the workplace, which can include HIV/AIDS. This destigmatizes HIV/AIDS by integrating the disease into an overall wellness package. A number of Business Coalitions in sub-Saharan Africa have expressed an interest to move into this area, including MBCA (Malawi), BCHA (Swaziland), NIBUCAA (Nigeria), UBC-HIV/AIDS (Uganda) and SABCOHA (South Africa).

10. Supporting communities

Some Business Coalitions are going beyond supporting the private sector and expanding their programmes to include communities as the people make up the local workforce and if infected, can infect other workers. In 2003 TBCA began offering companies an option to participate in community outreach programmes. This has so far been taken up by Chevron and Shell, which are supporting TBCA in this effort through providing their company employees with home visits together with TBCA staff to communities in the Bangkok and surrounding region. The financial contributions made by these MNCs are helping to provide

modest loans, transport to hospital and educational assistance. Currently, this initiative is reaching 1,300 families.

Another example is the strategic partnership of the Total Nigeria PLC and NIBUCAA (Nigeria) under the umbrella of a Community HIV preventive education project. This project has empowered a number of gas station customer attendants and driveway supervisors to provide information on HIV/AIDS to consumers of their products. GHARP (Guyana) has solicited approximately US\$ 250,000 of support from its private sector partners for community programmes. This support includes cash contributions, sponsorships and in-kind services and products. The contributions have been solicited since 2005, and includes an estimated \$180,000 Guyana dollars committed in 2006-2007.

These funds have supplemented HIV/AIDS prevention and reduction activities beyond the workplace, including sponsorship of community activities, events and concerts; donations of in-kind products to support OVC; donations to sponsor a newsletter to support HIV-positive individuals, donations to help provide transportation costs for physicians to treat HIV-positive individuals, as well as micro credit and training programmes to support HIV-positive individuals develop entrepreneurial and job skills. The micro enterprise programme reached more than 90 people living with AIDS to improve their access to loans as well as build entrepreneurial skills to allow them to compete for employment opportunities.

Organization Structure and Governance of Business Coalitions

Figure 11

Focus	Body	Role
Strategic	Board of Directors or Trustees/Mgmt Board/ General Assembly	Members: eight on average Meets every 6 to 12 months <ul style="list-style-type: none"> Provides strategic direction Mobilizes the private sector Monitors performance of the coalition
Strategic	In some Business Coalitions, these two bodies are combined Executive Office/ Executive Committee/ Steering Committee	Members: 8 on average Meets every 1 to 2 months <ul style="list-style-type: none"> Supports the translation of strategic direction into actionable items Provides leadership necessary for day-to-day operations
Tactical	Technical Committee	Members – as required Meets as required <ul style="list-style-type: none"> Provides input on specific technical aspects such as to discuss project status NB: Not all Business Coalitions have a technical committee, in which case the role is split between the above boards and the secretariat/programme office.
Tactical	Secretariat/ Programme Office	Members: approximately 3-7 in sub-Saharan Africa and 2-4 in Meets daily <ul style="list-style-type: none"> Runs day-to-day operations and includes positions such as: <ul style="list-style-type: none"> Programme manager Programme coordinator Office assistant Finance director Communications officer

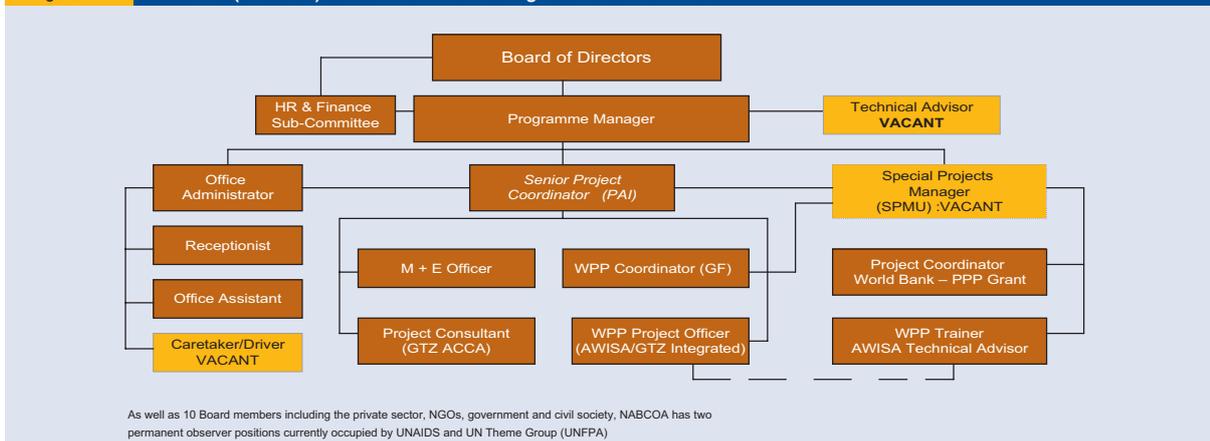
Most Business Coalitions around the world are composed of technical and strategic committees that determine the coalition’s direction and provide guidance for organizational activities. The terms used for these bodies varies slightly across coalitions even within the same region, but the roles they perform are essentially the same. Figure 11 captures the various roles performed by the different bodies in a national Business Coalition.

Board of Directors. For example, the CEO of Unilever Ghana chairs the Ghana Business Coalition against HIV/AIDS. Some Business Coalitions are chaired by a senior government official. In Nigeria, for example, the Business Coalition (NIBUCAA) is chaired by the president of Nigeria. The boards of some Business Coalitions go well beyond the private sector. In Malawi, for example, the Business Coalition also includes representation from the National AIDS Council. In Namibia, board members include representatives from NGOs, senior government, People Living with HIV/AIDS (PLWHA) groups and two permanent observer positions currently occupied by UNAIDS and UN Theme Group. (See Figure 12).

Strategic operations

Board level representatives from different industries, if not the CEOs themselves, typically make up the

Figure 12 NABCOA (Namibia) Business Coalition Organization Structure



In June 2007, BHCA (Swaziland) established a board of directors for the coalition in addition to a technical committee following a decision by the board of the federation and chamber for the coalition to be autonomous. Twenty representatives from all stakeholder groups sit on this board, a majority of whom are founding members at the CEO level. The board provides strategic direction to the Business Coalition by bringing in a private sector perspective to ensure the coalition continues to serve the needs of the private sector in issues of HIV. It also positions the Business Coalition to continue advocating to non-members to take action against HIV and AIDS in the workplace. In addition, the board mobilizes funding and provides strategic guidance to the secretariat.

Technical committee

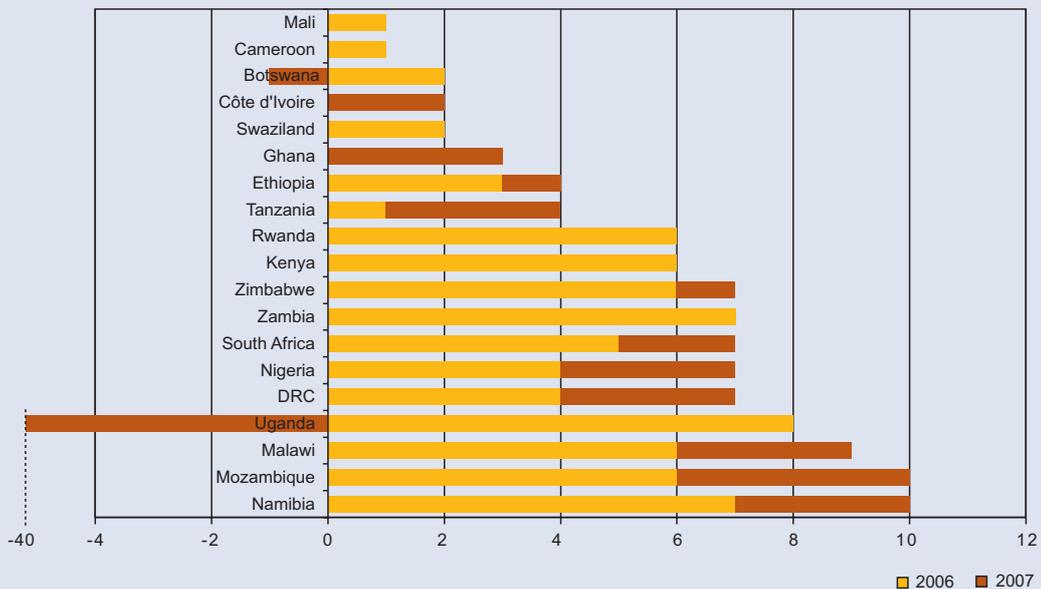
GBCA's (Ghana) 11-member technical team meets bimonthly to discuss and recommend projects, review funding of GBCA objectives and define methods of implementation and responsibilities. BCHA's (Swaziland) 20-person technical committee includes all stakeholders from the private sector, including people who work in the field such as doctors, nurses, labour union representatives, People Living with HIV/AIDS (PLWHA), civil society and other stakeholders. The role of the BCHA's technical committee is to provide

technical guidance to the board and the secretariat. MBCA's (Malawi) technical committee has 12 private sector members and 12 from other sectors. They are split into sub-groups focusing on treatment and care, prevention, policy issues, research/advocacy/monitoring, communication and resource mobilization. Two separate technical bodies have been formed within CEMA (Mauritania), the Evaluation Commission and the Commission for Control and Monitoring, to evaluate the funding proposals submitted by members and to ensure monitoring and evaluation of company HIV/AIDS programmes and coalition activities.

Secretariat/programme office

Most Business Coalitions in sub-Saharan Africa have three to seven employees in their secretariat as figure 13 below shows. Roles typically include those involved in the day-to-day running of the coalition such as coordinator, programme manager, finance director, communications officer and office assistant, although staff are often required to multitask. Some Business Coalitions have additional positions such as NIBUCAA (Nigeria), which has a PLWHA representative in the secretariat responsible for advising members on a daily basis.

Figure 13 Business Coalitions in sub-Saharan Africa have slightly increased their capacity from 2006-2007 though not to the extent some of them had hoped



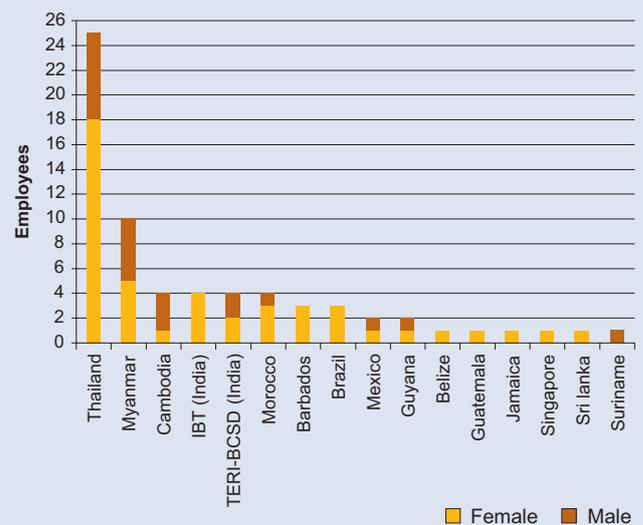
In 2006, most coalitions defined ambitious staff recruitment plans for 2007, but the actual figures collected in 2007 show that many faced challenges in meeting their numbers, mainly due to funding constraints. For example, Botswana currently has three vacant positions due to lack of funding - coordinator, administration officer and communications and marketing officer.

Two Business Coalitions reduced staff numbers. BBCA (Botswana) dropped from three to two people with three vacant positions that they have been unable to fill due to lack of funding - coordinator, administration officer and communications and marketing officer. Internal staff capacity in UBC-HIV/AIDS dropped significantly from 45 to eight people. This was due to a change in the organization structure which is described in more detail below in section titled "Evolving organization structures". However, a number of Business Coalitions were successful in recruiting new staff members. For example, Ghana had no staff in 2006 and now has three staff members.

In other countries outside sub-Saharan Africa, the number of employees in the secretariat are lower (See figure 14). Typically between two to four people are employed. For example, the coalitions in Belize, Guatemala, Jamaica, Singapore, Sri Lanka and Suriname have one full-time employee that runs the coalitions and delivers services to the private sector. However, there are two exceptions: staff numbers for TBCA (Thailand) and MBCA (Myanmar) are exceptionally high in comparison to the other Asian countries. TBCA has 25 full-time staff which is due to the accreditations of HIV prevention and management in the workplace programmes they offer, as well as additional staff now working on TB prevention and management programmes. For Myanmar, staff numbers are also very high with 10 full-time and 10 part-time staff based at the headquarters in Yangon. Together they conduct research, document findings, design programmes, develop trainings (both to deliver to staff and for staff to deliver to projects to build capacity), conduct training and monitor activities. To execute the programmes, MBCA has additional part-time staff working in each of its six township offices to implement and monitor programmes on the ground. For staff data collected outside sub-Saharan Africa, there is a slight bias towards female employees, which is captured in the same graph.

Figure 14

Most Business Coalitions outside sub-Saharan Africa employ 2, 4 people with the exception of Thailand and Myanmar. There is a slight bias towards female staff



Although only full-time staff are shown, a number of coalitions benefit from part-time, voluntary and in-kind support. For example, GTZ has seconded technical advisors to Namibia, Zambia, Tanzania and Cote d'Ivoire for periods ranging from three months to three years. In Nigeria, NIBUCA's secretariat is a purpose-built office donated by a member company, Julius Berger Nigeria PLC, in lieu of subscription fees; the company also provides free security, electricity and water supply to the coalition.

One of the possible reasons that Business Coalitions in sub-Saharan Africa have greater staff numbers than those in other countries may be due to their different types of service models. National Business Coalitions in Africa tend to charge membership fees and provide their members with a number of services. In Asian countries, the model is more focused on service delivery, where members do not pay membership fees but they pay for the services they desire. This means fewer full-time staff are required in the secretariat as they only take on work they can deliver.

Evolving organization structures

As Business Coalitions develop, grow and adapt to serve their members more efficiently and effectively, their structures also evolve to accommodate these changes. In 2006, for example, UBC-HIV/AIDS (Uganda) employed 45 people. Because approximately 90% of staff had a medical background, they were employed in one of the three UBC-HIV/AIDS treatment centres. Each centre had nearly 12 staff including doctors, laboratory technicians, pharmacists, counsellors and data managers. The centres provided free comprehensive HIV management services to close to 4,000 diverse workers, their communities and their families which included non-members. The remaining 10% of staff were located at headquarters and included positions such as Operations Manager, Corporate/Programme Manager, Human Resources Manager and Logistics Officer. UBC-HIV/AIDS had plans to open a fourth treatment centre in northern Uganda, which would have involved employing a further 15 people by the end of 2007.

However, on 20th August 2007, UCB-HIV/AIDS became 100% self-sufficient with no more reliance on donor funding. This meant a shift in focus to clients who were either insured through their employers or self-sponsored. The funding and capacity to continue providing free services to non-members would no longer be possible as there would be no funding to support this without relying on donors. UBC-HIV/AIDS decided to take this route and as a result made dramatic changes to its staffing, structure and stature. UBC-HIV/AIDS reduced its workforce by 56% and today, employs eight staff who all multitask. They provide Training, Testing and Treatment (3Ts) to 25 companies with 80% of their efforts focused on prevention (training and testing activities in the workplace) and 20% on treatment.

Headquarters and provincial offices

MBCA (Myanmar) supports an organization structure that is headquartered in Yangon with an extended local township office in Pyay. It plans to set up a number of additional local township offices throughout the country in Mandalay, Pakokku and Monywa within the next 12 months. Initially, these local offices will be supported by the head office in Yangon with regards to programmes, programme funding, technical assistance and annual evaluation. It is expected that

after two years the operational costs for the local Business Coalition offices shall be borne by the local business owners. The plan is to employ another 10 staff members in the next six months in the Yangon office to support this effort.

The regional Business Coalition APBCA (Asia-Pacific) is headquartered in Melbourne and has a local country office in Bangkok that is co-located with the Thailand Business Coalition on AIDS (TBCA).

CIELS (Democratic Republic of Congo) is an example of another national Business Coalition with a main office in Kinshaha and two provincial offices in Lubumbashi and Mbuji Mayi. It plans to open two additional offices in the provinces of Equateur and Kasai Oriental. To ensure efficient communication between the central and provincial offices, CIELS has adopted an innovative, Internet-based communication platform that it is currently piloting.

CIELS (DRC) adopts Internet-based communication platform

CIELS has established a partnership with CCA and AllAfrica Global Media to adapt an Internet-based communication platform to facilitate communication and resource sharing between the central CIELS office in Kinshaha and its offices in the provinces. AllAfrica has agreed to pilot this application in the DRC and plans to adapt, install, host and manage a version of the platform during the pilot. CCA facilitated a three-day training session held by two AllAfrica staff in Kinshaha in October 2007 to train CIELS representatives on the tool so that the coalition can integrate it into their activities. The communications platform allows business coalition representatives to:

- Hold live online chats (by typing) with a number of participants in various locations
- Archive the conversations as a record for participants and as a means of sharing the content with non-participants
- Search the conversations by date and topic
- Share documents by placing them in a daily page accompanying the chat archives

Membership Models Employed by Business Coalitions

This chapter looks at the different models employed by national Business Coalitions to engage and serve the private sector. Business Coalitions tend to either engage the private sector through **membership**, in which case they usually charge a membership fee, or they provide them with services for a fee, which are either donor funded or paid for by the recipient companies. The **fees-for-services** model coalitions tend not to have members and do not charge membership fees, although some classify companies they work with as members. An example is MBCA (Myanmar) which does not charge companies a membership fee but regards them as coalition members.

Some coalitions operate under a **mixed model**: membership-based and fees-for-services. Typically, membership fees cover office costs and provide members with basic benefits, and additional services are offered for a fee, which allows the coalition to bring in additional revenues.

Membership-based model

For coalitions that charge companies a membership fee, the arrangement can be:

A **flat rate membership fee** is charged regardless of company size, number of employees and revenues that is usually paid annually. In the case of TERI-BCSD (India), a flat rate fee gives companies membership for five years.

A **varied membership fee** is charged depending on the size or type of the company as defined by the coalition, for example depending on the number of employees, type of organization or annual turnover. Examples of coalitions employing this model include Zambia, which charges US\$ 122 (K 0.5m) per 50 employees up to US\$ 1,300 (k 9m) for 900 employees and above. JaBCHA (Jamaica) basis its membership fees on the Jamaica employers' federation model. This is J\$ 20,000 per annum for businesses with over 200 employees, J\$ 15,000 for business with 31 to 200 employees and J\$ 10,000 for business with fewer than 30 employees. There is no difference in the benefits they receive. Namibia also charges membership fees based on number of employees, which it also uses to classify companies into small, medium, large and corporate as shown below.

NABCOA (Namibia)			
NABCOA (Namibia) Membership Tier	Criteria	Fees (N\$ annually)	Total Members
Small	1-50 employees	N\$ 1,200	15
Medium	51-250 employees	N\$ 2,400	12
Large	251-500 employees	N\$ 10,000	19
Corporate	>500 employees	N\$ 15,000 (corporate) N\$ 30,000 (founder)	9 10
Total			65

CIELS (DRC) charges according to type of company		
CIELS (DRC) Membership Tier (on a National Level)	Fees (US\$ annual)	Total Members (as of Nov 2007)
Private enterprises	1,500	16
Parastatals	1,500	8
Public enterprises	1,500	18
SMEs and the informal sector	600	10
Employers' federations	600	5
Unions	600	7
Total		64

NIBUCCA (Nigeria) charges according to turnover				
NIBUCCA (Nigeria) Membership Tier	Criteria (Turnover in Naira)	Annual Subscription Fees		Total Members
		Naira	US\$	
Category C	<N500 million	N 70,000	500	3
Category B	N500 million–N1 billion	N350,000	2,000	4
Category A	> N1 billion	N700,000	5,000	32 (inc 17 MNC)
Total				39

Ghana takes into consideration both the number of employees and the turnover

A **tiered membership** allows the company to decide at what level they would like to engage. Two to four levels are usually offered and termed bronze, silver, gold or platinum. Each level offers members different benefits at different prices. MBCA (Malawi) is a good example of such a coalition.

MBCA (Malawi) offers companies a tiered membership. Each level entitles members to a list of services, but the cost of membership for each tier does not change according to company size, however, SMEs may be offered concessions on a case-by-case basis.



MBCA (Malawi) offers companies Bronze, Silver, Gold or Platinum membership

Membership Category	Annual Subscription	Benefits
Bronze	MK 25,000.00	<ul style="list-style-type: none"> ■ One vote ■ Access to HIV/AIDS Information ■ Receive free MBCA publications and relevant and updated HIV/AIDS information ■ Access to 20% subsidy on all MBCA organized training programmes ■ Access to MBCA technical expertise on HIV/AIDS workplace policy development, workplace programmes implementation, Care and Support ■ Access to technical support on proposal development ■ Access to ARVs
Silver	MK 50,000.00	<ul style="list-style-type: none"> ■ All the benefits in the bronze category except for number of votes ■ Two votes ■ Access to 30% subsidy on all MBCA organized training programmes ■ Advertise in MBCA Publications ■ Access to ARVs
Gold	MK 75,000.00	<ul style="list-style-type: none"> ■ All the benefits in silver category except for number of votes ■ Three votes ■ Access to 40% subsidy on all MBCA organized training programmes ■ External linkages with other stakeholders on HIV/AIDS programmes ■ Access to technical expertise on research, advocacy and M & E activities ■ Featured on the radio programmes for MBCA ■ Organization activities featured in MBCA magazine/publication ■ Access to Community and Social responsibility programmes ■ Represent MBCA in local and international meetings ■ Organization representatives to be nominated and voted for in absentia ■ Access to ARVs
Platinum	MK 100,000.00	<ul style="list-style-type: none"> ■ All the benefits in gold category except number of votes ■ Four votes ■ Organization CEO eligible for election as Chairman of MBCA Board ■ Access to 50% subsidy on all MBCA organized training programmes ■ Access to ARVs

A number of coalitions believe the serve-all model allows them to serve even more companies as it eliminates a membership structure and fees. In sub-Saharan Africa, this model is used by APELAS (Rwanda), BBCA (Botswana) and BCHA (Swaziland). These coalitions tend to be predominantly funded by international donors and sometimes the funding they receive is for specific projects. For this reason, it is not as easy to capture the activities and services they offer.

Those who disagree with this model would argue that coalitions should indeed be supported by businesses that are serious about tackling HIV/AIDS and not donors. They also question the long-term sustainability of the coalition and its ability to decide what services to provide without long-term finances. However, it is interesting to note that BBCA (Botswana) actually moved from a membership-model to a serve-all model in 2002 due to inconsistent and low payment rates of membership fees. Yet 13 years on, the coalition is still going strong.

TBCA (Thailand) also started as a membership-based organization and then moved to a serve-all through a fees-for-services model. However, currently it is 80% funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria, which has allowed it to greatly expand its coverage throughout the country. This year TBCA will embark on a revised business plan aimed at ensuring long-term sustainability. The coalition plans strengthen its commercial arm and revert back to its original mission as a membership and fees-for-services based organization while retaining donor support from the government. To date, donor funding has allowed TBCA to reach thousands of companies with policy and programme support, although TBCA does admit that it is currently operating more as an NGO and less as a Business Coalition by acting as a conduit for communication between government and business.

Fees-for-services model

Another model that serves all businesses is termed a fees-for-services model. This model is highly favoured

throughout Asia, employed by coalitions such as BCAS (Singapore), MBCA (Myanmar), NBA (Indonesia) and TBCA (Thailand). Some of these coalitions actually moved away from a membership-based model to a serve-all model. They found that offering traditional services distracted the staff from providing services to businesses. For example, regular newsletters take a long time to prepare and by the time they had been written, translated into the local language and distributed, they were almost out of date. Bigger still was the issue of inconsistent fee payments as coalitions struggled to get members to pay. Today, this remains a challenge for the membership-based coalitions with some countries receiving only 20% to 30% of fees.

TBCA (Thailand) fees-for-services model

- Executive briefing: 1-2 hours Baht 15,000
- HR workshop: 4 hours-1 day Baht 20,000
- Staff training: 2-3 hours Baht 10,000
- Community outreach: from Baht 5,000 to Baht 2 million
- Fund raising for the community: Baht 700,000 average

Mixed model

With the challenges of both membership-based and fees-for-services coalition models, a hybrid model has been employed by some of the newer coalitions such as PNG BAHA (Papua New Guinea). A mixed model has also been adopted by coalitions revising their strategy to determine the best way of continuing to serve the private sector, while at the same time ensuring sustainability, especially in situations where business are not paying their fees on time, or not paying them at all.

Changing membership models

Some Business Coalitions such as BBCA (Botswana) and TBCA (Thailand) have changed their membership models over time. AFBI (Barbados) also operated a membership-based model, but found that companies often engaged at the lowest level both financially and in terms of taking action. Minimum engagement still allowed businesses the privilege of saying they were members of the coalition without doing much. This meant the coalition did not have enough funding as Barbados is a small country and cannot afford to

engage fewer businesses at such a low level. This situation would perhaps have been acceptable in a larger country with more businesses.

To further increase private sector engagement, AFBI moved to an investment model where companies that pay US\$ 20,000 or more have an opportunity to shape and determine the Business Coalition's strategy. Each of these companies are given a vote that they can exercise at the annual general meeting. Other businesses can join the coalition as associates, which means they do not receive any votes and cannot provide direction to the coalition.

PNG BAHA (Papua New Guinea) employs a mixed model – membership-based and fees-for-services

The coalition serves its members by:

- Providing accurate and useful information on HIV/AIDS, particularly relating to workplace and employment issues
- Working with employers to eliminate HIV-based discrimination from the workplace
- Developing and coordinating HIV/AIDS behaviour change programmes for workers
- Assisting companies to ensure employee access to HIV prevention, care and treatment services

Member benefits included in membership fees

PNG BAHA has been established to help employers protect their human resource investments. PNG BAHA can assist employers by providing advice on best practice approaches to minimizing the impact of HIV on your business. Membership entitles business to the following services:

- An assessment of the workplace HIV policy and programme environment
- Briefing to executive management and human resources teams
- Assistance to bring company policy in line with best practice guidelines

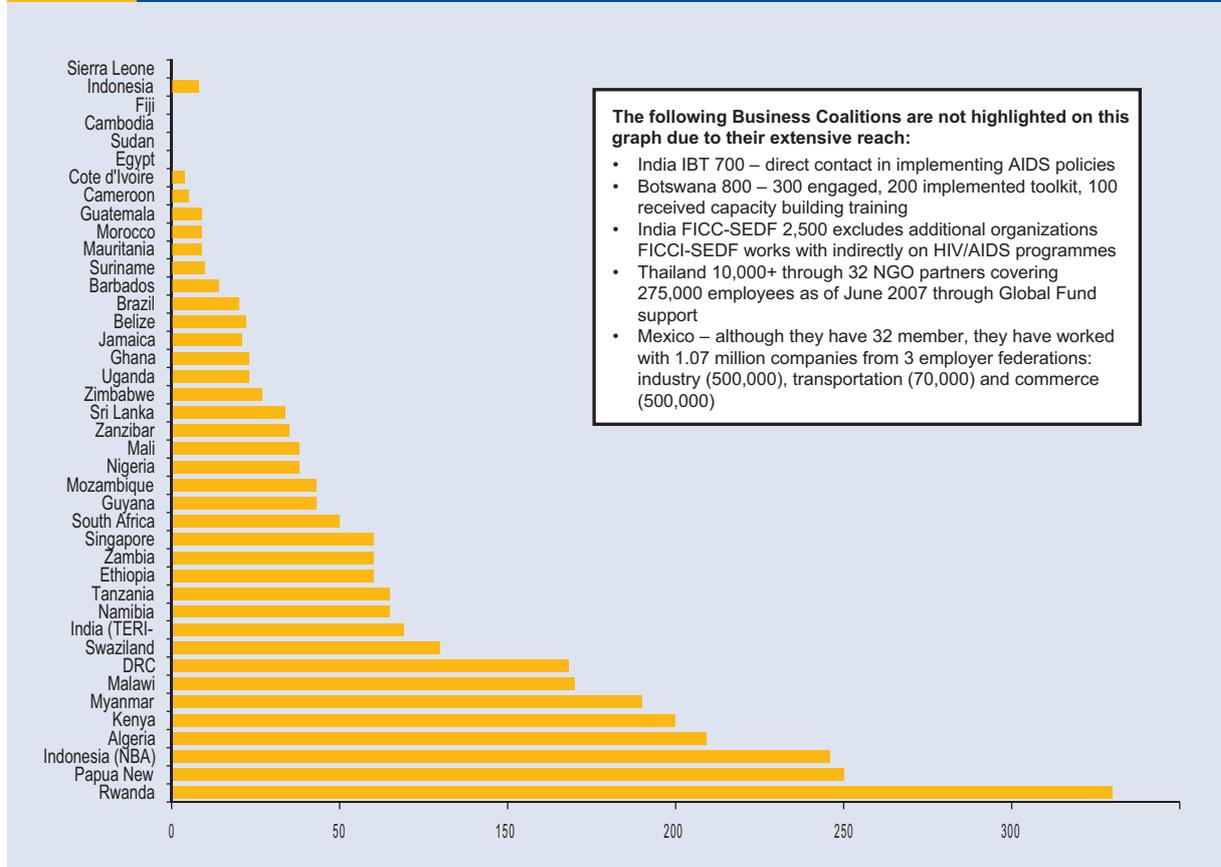
Other tools available for a small fee:

- Design of a tailored HIV programme package
- PNG BAHA workshop training programme delivered on site

Organizations reached by Business Coalitions

Despite the different models employed by Business Coalitions, all fulfil their purpose of engaging and supporting the private sector to tackle AIDS. Serve-all coalitions are reaching many more companies, typically in the hundreds, and membership-based coalitions connect with 30 to 100 businesses, however, partnership models such as the fees-for-services model employed by TBCA (Thailand) in partnership with the government have proven to reach the most companies. For example, TBCA has touched a record breaking 10,000+ organizations through 32 NGO partners covering 275,000 employees as of June 2007 with support from the Global Fund to Fight AIDS, Tuberculosis and Malaria. However, coalitions need to develop strategies for when such funding partnerships end.

Figure 15 Number of Organizations National Business Coalitions Are Reaching



Funding Models Employed by Business Coalitions

Business Coalitions tend to be funded either by the private sector, international or national donors or a combination of both. However, the higher the ratio of private sector investment and funding, which usually comes in the form of membership fees and/or fees-for-services, the greater the likelihood of the coalition's sustainability. For example, for Business Coalitions in Asia to become members of the regional Business Coalition APBCA (Asia-Pacific Business Coalition on AIDS), at least 50% of their funding must come from the private sector to ensure sustainability.

Donor funding and technical assistance

Some argue that in situations where coalitions rely heavily on donor funding, it is an indication that the private sector in those countries is not serious about tackling AIDS in the workplace. The belief is that coalitions should be mostly – if not entirely – funded by the private sector. However, some coalitions maintain that initial funding and technical support is required to help them become established and to enable them to focus on seeking private sector engagement. MBCA (Myanmar) was founded by a 50% donation from local businesses and a 50% contribution from the public sector, AusAID.

Some coalitions need time to learn how to develop and execute a strategy to engage the private sector. They need help in building skills that will allow them to decide what activities and services to provide, which companies to target, what skills and training are needed to ensure that they can deliver these services, and what benefits they should demonstrate to engage the private sector. Once they have this knowledge, coalitions are better equipped to engage members.

To ensure that all companies can be served – especially SMEs, which are particularly hard to engage – some coalitions such as BBCA (Botswana) are still donor dependent. They maintain this funding is crucial to allow them to reach SMEs; a challenging sector to engage despite the greater impact AIDS can have on their operations. Using this model, BBCA is reaching more than 800 companies. However, BBCA is considering moving to a hybrid or membership-fee based model to help ensure longer-term sustainability. This discussion will be on the agenda for the next annual general meeting. To ensure it still can reach SMEs, BBCA is developing a strategy in partnership

with BizAIDS, ISEC and BOTUSA, which they hope to deliver on starting in February 2008.

Some coalitions such as NBA (Indonesia) welcome voluntary donations from companies, organizations and individuals, hence their services tend to be more difficult to define. Some coalitions only seek assistance from international donors for specific projects, for example NABCOA (Namibia) sought funding to assess the private sector's interest in TB workplace programmes. This may be in addition to private sector funding.

There are a number of international and national donors that support Business Coalitions. A select few are shown in the table below although it should be noted that there are other donors involved. Their support can be technical, in-kind or through direct donations.

Some Business Coalition international donors

UNAIDS	ILO	World Bank
World Economic Forum	CCA	PharmAccess Foundation
UNDP	USAID	NORAD
Global Fund to Fight AIDS, TB, Malaria	GBC	SIDA-ENTREPRISES
AusAID	GTZ/ ACCA	Action for AIDS
VSO	DFID	SIDA
UNDOC	IFC	WBCSD
International HIV/AIDS Alliance	CDC	

Business Coalitions may not make full use of available donor funding because they do not know about the programmes or the processes involved for accessing resources such as the Global Fund to Fight AIDS, Tuberculosis and Malaria. In addition, they may have little or no experience in submitting proposals. Organizations such as GTZ provide technical assistance to Business Coalitions to help them learn how to write and submit proposals to tap into donor funding.

Membership fees

Membership fees vary greatly across Business Coalitions according to the size of company, number of employees, turnover, or level of membership if it is a tiered model (bronze, silver, gold or platinum). These models are described in the chapter, "Organization structure and Governance of Business Coalitions". There is no clear indication of how Business Coalitions

choose to set membership fees, although it can be based on the services they offer and what the companies in the country can afford and are willing to pay.

One of the benchmarks used to determine what companies can afford to pay is the Gross National Income (GNI), which is an indicator of the strength of the national economy. However, some coalitions have set their fees to almost twice the GNI per capita such as SABCOHA (South Africa) and CSP (Mali), and some charge almost five times the GNI per capita such as EBCA (Ethiopia) and ECoSIDA (Mozambique). The fees are varied, and data collected in sub-Saharan Africa show that costs can range from US\$ 18,200 for CECL (Cote d'Ivoire) to zero for the serve-all coalitions in Botswana, Rwanda and Swaziland. The rate for CECL gives members access to all services offered by the coalition, a seat on the board of directors and the association of their corporate name with CECL promotional events. Where coalitions charge a bracket of membership fees, the highest level is shown in Figure 16 below.

Fees-for-services

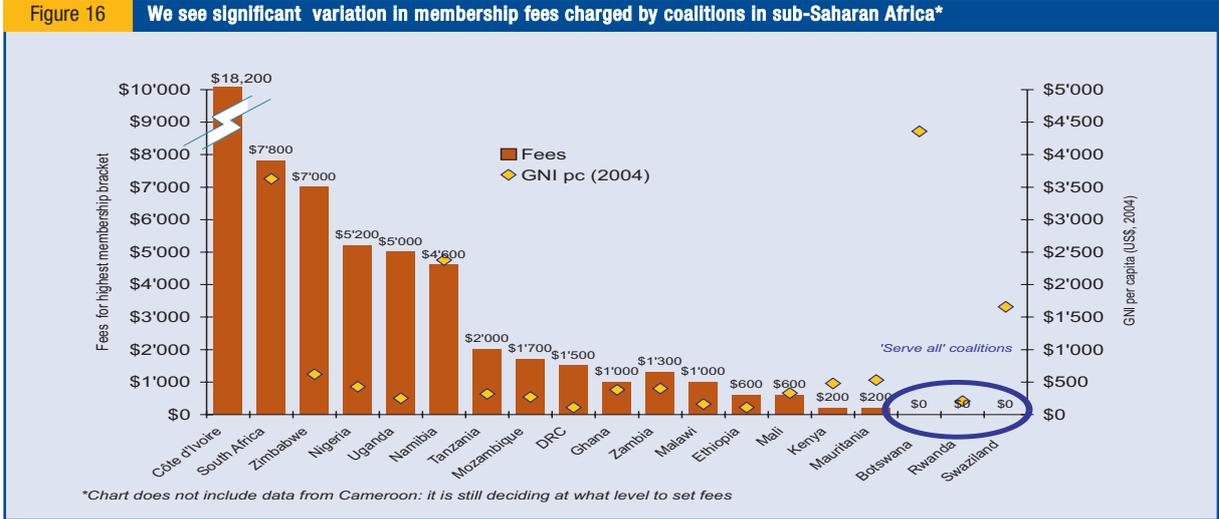
Many Business Coalitions, especially those outside sub-Saharan Africa, have chosen a fees-for-services model. Unfortunately, it was not possible to collect the different prices charged for services for this report. One of the disadvantages of this model is that the Business Coalitions tend to have little money to use for travel to international conferences for networking and learning purposes. In this case, donor funding would be extremely valuable to the fees-for-services based coalitions.

Coalition finances

Data on coalition finances has been difficult to collect. A few were able to assign high level percentage costs to operational, standard projects and specific projects as shown in the table below. For example, Myanmar has high operational costs due to its 10 full time and 20 part-time staff who manage projects in different locations of the country.

The low operational costs for BCAS (Singapore) are because BCAS does not have an office. Its single staff member works from home as there is currently no excess revenue to establish and sustain an office. Including printing, postage, stationary, taxis, phone and fax machine, operational costs are just under SGD 1,000 per annum. BCAS has plans to grow in which case office space and additional staff salaries will be required, which would push up the operational costs. Currently 10% of BCAS's earnings are invested back into the coalition. For example, for every SGD 1,000 Singapore dollars earned through training, SGD 100 are deposited into the BCAS bank account.

	Operational (staff salaries, rent, equipment, overhead)	Standard projects	Specific projects	Staff
TERI-BCSD (India)	20%	20%	60%	4
MBCA (Myanmar)	40%	60%		10 FT & 20 PT
BCAS (Singapore)	10%	90%		1



■ Past, Present and Future Business Coalitions

This chapter looks at Business Coalitions in their different stages of development from the embryonic stages through to birth, rebirth and death. Although the latter term conjures negative images, some Business Coalitions have died a natural death with either other more pressing country issues arising such as war and conflict, or funding has simply dried up. It is hoped that this information proves useful not only for existing Business Coalitions, but also for those currently establishing themselves as they determine how to successfully serve the private sector by avoiding the pitfalls experienced by others.

As the landscape of Business Coalitions is continually changing, many lessons can be learned from those that:

- Are no longer on the map
- Are well established
- Have just launched and are still finding their feet
- Have relaunched or are soon relaunching
- Are planning on launching soon

Business Coalitions no longer on the map

Latin America used to have an additional four national Business Coalitions in Argentina, Paraguay and Uruguay in 2000, as well as the Business Council against AIDS Bogotá, Columbia (Caja de Compensacion Familiar CAFAM) which was created by several private business leaders in the country. UNAIDS and ILO were instrumental in the formation and launches in Argentina, Paraguay and Uruguay, helping to gather the political and technical support required. The Business Coalitions were set-up according to the successful model employed by the Brazil Business Coalition.

Each coalition was launched with support from approximately 20 large businesses each. For example, Argentina was supported by DuPont and The Coca-Cola company. However, once UNAIDS left, it was difficult for ILO to continue providing the technical support required by the Business Coalitions. At the same time, the government commitment was not strong enough to keep the coalitions alive. As a result, all three disappeared. In Columbia, the council closed in 2005 due to the permanent absence and lack of interest shown by the private enterprises initially committed. The main reason for this lack of interest was due to other pressing issues in the country such as armed conflict, drug trafficking, and internal forced displacement. With the country rife with such problems,

it became increasingly difficult to interest the private sector to take action in the area of HIV and AIDS.

Other coalitions such as IBCA (India), Bangladesh, Nepal and Malaysia are no longer appear on the map, but there is talk of bringing them back to life.

For current and new coalitions, it is important to build and continually update skills in-house so once donors leave, the coalition can continue to operate successfully. Today, this is much more prevalent in Business Coalitions where donors devote a lot of time to transferring skills and knowledge to the programme office or secretariat. It is also increasingly common for government to be involved, whether through supporting the establishment of coalitions or through representation on their boards.

The private sector should also be consulted to ensure that there is an understanding of the benefits a Business Coalition can bring to both parties. Some coalitions conduct a situational analysis to assess the needs of the company and develop a specific plan of action for them which they often also implement. This is the case for ABCT (Tanzania).

Well-established and just-established Business Coalitions

There are four regional Business Coalitions and 47 national Business Coalitions that around the world today. The first one was launched in 1993 in Thailand and the most recent ones in December 2007 in Indonesia, Fiji and Sierra Leone. (For more information see Figure 2 in the "Introduction to Business Coalitions" chapter.

Some Business Coalitions are housed within chambers of commerce or employers' federations. In some countries, businesses have come together to create a platform for the private sector to deal with common issues. Such coalitions are also featured in this report because they are not exclusively focused on tackling AIDS, but they support the private sector in this effort. For example, the Algerian Business Coalition (Forum des Chefs d'entreprises) is a confederation of businesses created in 2000 not only devoted to AIDS, but also a number of other issues facing the private sector.

Similarly TERI-BCSD (The Energy Research Institute – Business Council for Sustainable Development) was established in 1974 to provide a credible platform for corporate leaders to tackle future energy, environment



and social development issues. TERI-BCSD decided to support businesses in tackling AIDS in 2005.

These business platforms are also being leveraged by international partners such as by UNAIDS in Algeria and the World Bank in TERI-BCSD India to reach the private sector and support the response to AIDS.

Relaunched or soon-to-be relaunched Business Coalitions

UNAIDS and ILO are committed to recreating some of the Business Coalitions in Latin America. In Paraguay, UNAIDS and ILO held a number of meetings in May 2007 to discuss how to proceed. In Argentina, meetings were held by UNAIDS and ILO in July 2007 which were attended by 20 member companies of the Argentinean Sustainable Development Council. The purpose of the meeting was to share some information about ILO, UNAIDS and their role in HIV and the workplace. In Uruguay, support is still required from the government before further discussions can take place.

In Cambodia, the existing Business Coalition was relaunched by the Asia-Pacific Business Coalition on AIDS.

Future Business Coalitions

With the increased recognition of the value and impact Business Coalitions can deliver to the private sector, demand for creation and for their services has been growing. There are also plans to revive IBCA (India), which was originally launched in 2004. Below are a number of national Business Coalitions that are planned for launch in 2008-2009. Including the relaunched coalitions in Argentina, Paraguay and India (IBCA), 10 are expected to be launched in 2008-2009.

Benin

In Benin, the Chamber of Commerce together with the National AIDS Commission (SP-CNLS) created a platform for the private sector to come together to tackle AIDS, TB and malaria. CEBAC (Coalition des Entreprises béninoises et Associations Privées pour la Lutte contre le VIH/SIDA, le Paludisme et la Tuberculose) committed to tackle the three disease areas in October 2007. The platform is yet to engage the private sector, but once engaged, it will serve as a coalition.

Chad

UNAIDS country office will facilitate the establishment of a Business Council for HIV/AIDS in Chad. Advocacy meetings will be organized for chief executive officers and general managers of large and medium enterprises in the country. A steering committee will be constituted to draft the constitution of and launch the Business Council. The group will meet twice a year to discuss issues relating to HIV/AIDS and the private sector.

China

The Asia-Pacific Business Coalition on AIDS (APBCA) has already been in discussions with the government of China about launching a Business Coalition.

Gambia

A regional meeting with the Global Fund to Fight AIDS, Tuberculosis and Malaria was held in June 2007 where the need for a national Business Coalition was reiterated. The objectives of the Business Coalition would be to develop and implement policies and programmes for the management of HIV and AIDS, in line with national policy guidelines; to make available and accessible to all employees workplace HIV and AIDS policies and guidelines; to plan for and allocate resources for the implementation HIV and AIDS prevention activities for staff; and to protect the rights of HIV-positive workers.

Guinea

Guinea UNAIDS and the National AIDS Council are currently discussing setting up a Business Coalition on AIDS with support from SIDA-ENTREPRISES.

Pakistan

UNAIDS, in collaboration with ILO, intends to form a Business Coalition on HIV & AIDS in Pakistan in 2008. A meeting is due to be held to discuss the collaboration. Both ILO and UNAIDS have earmarked some funds to initiate the Business Coalition.

Vietnam

Workplace services and training are currently being delivered by SMARTWork Vietnam. These programmes are similar to those being delivered by other APBCA Network countries and already meet APBCA best practice standards. The Country Coordinator of SMARTWork Vietnam, Patrick Burke, will become the inaugural Executive Director of the new Vietnam Business Coalition on AIDS (VBCA). A number of large companies trading in Vietnam have expressed interest in supporting the VBCA and a corporate structure is being developed.

Conclusions and Opportunities for Business Coalitions

This chapter draws conclusions from the data gathered from four regional, 47 national and 10 emerging Business Coalitions. These conclusions offer a starting point for future discussions, decisions and actions by Business Coalitions and all other stakeholders. This chapter also identifies some opportunities for key stakeholders to contribute to the sustainability and ultimate success of Business Coalitions. The rapid proliferation of coalitions today demonstrates that they are in high demand. However, this demand must be met with a supply of strengthened coalitions or new coalitions that are equipped with the right skills and resources to effectively deliver services to businesses to help them address AIDS in the workplace.

Challenges faced by Business Coalitions

Most of the challenges repeatedly highlighted by Business Coalitions can be divided into two issues: funding and skills, which are sometimes interrelated. Apart from long-term funding, coalitions continue to

Some coalitions have a long way to go to realize the vision set by some to serve as the voice of the private sector or be the major source of information in their country. However, the progress of some must not be underestimated. The “Impact and Value of Business Coalitions” chapter outlines some success stories, in an attempt to showcase the positive impact coalitions are making on the private sector’s response to AIDS. Nevertheless, all coalitions need more support to strengthen their organizations and fulfill their ambitious visions.

Ensuring sustainability – points for consideration

Based on some of the conclusions drawn from the data gathered from Business Coalitions all over the world, this report highlights five points for consideration by both existing and emerging coalitions to ensure sustainability.

Challenges faced by Business Coalitions: Funding and Skills	
Funding	Skills
Operational office costs including: <ul style="list-style-type: none"> ■ Staff salaries ■ Rent ■ Materials ■ Equipment Attending conference and meetings Opening smaller provincial offices to provide more on the ground support Training of trainers Commissioning new market research to ensure awareness of private sector needs	Project management Marketing and communication Cost Benefit Analysis Monitoring and evaluation Engaging SMEs Budgeting and accounting Development and submission of funding proposals and fund raising Strategic planning including linking to the National AIDS Committees NACs IT Access to senior management Market needs assessment Day-to-day secretariat skills

face difficulties in engaging SMEs. Although coalitions in sub-Saharan Africa have been trying for some time, and some have been successful, others have not yet managed to support this sector. ABCT (Tanzania) states, “Engaging SMEs is still a challenge in our case. SME’s have not come forward to use fully ABCT resources even when they are aware of us.” The MBCA (Malawi) highlights a similar challenge: “It has not been successful in that we realized we need a lot of financial resources to meet their needs and cater for all of them.”

- *Establish a coalition based on local needs*
To ensure the immediate success and sustainability of a Business Coalition, its existence should be based on local country needs. This may be due to high HIV prevalence, a demand from the private sector, a government requirement or a proactive step by stakeholders. In all cases, it should serve the needs of the local private sector, which includes MNCs, national companies and parastatals, as well as SMEs and other stakeholders. Local country requirements may also dictate the type and content of services and training offered.



- *Engage all relevant stakeholders upfront before launching a national coalition*

Before a coalition is established, all the relevant stakeholders should be engaged to increase awareness and to help shape the coalition. The engagement of all partners can facilitate key relationships that will help to develop a successful coordinated country response. For example, trainings and services can be shared to be more efficient in terms of cost, time and quality rather than reproducing similar materials and targeting the same groups. There is also an opportunity to learn from each partner's experiences. An example of a diverse group of founding members is the PNG BAHA (Papua New Guinea) national coalition, which was developed by a regional Business Coalition, the Employers' Federation, the Chamber of Commerce and Industry, the Business Council and more than 10 private sector companies.

- *Ensure continued private sector engagement and investment*

It is critical that a coalition forms strategic partnerships with key private sector companies. For example, AFBI (Barbados) and CECI (Cote d'Ivoire) both offer the private sector an opportunity to shape the coalition by becoming board members and subsequently key decision makers in determining the direction and future of the coalition. This also ensures the coalitions are kept up-to-date with the changing demands of the private sector.

- *Adapt model and services to suit changing needs*

Adaptation is a key driver for any company, which Business Coalitions should seek to emulate. Coalitions should continually adapt their organizational, funding, recruitment, service and activity models to reflect changing private sector needs. For some coalitions, this means building capacity to engage the private sector in other disease areas such as TB, malaria and more holistic wellness programmes.

- *Source and build in-house skills and expertise*

Business Coalitions should not wait for the private sector and donors to approach them with offers of technical support. Coalitions should go out and proactively seek partners to help them develop the in-house skills and expertise they feel is most needed. Coalitions should assess their skill requirements before approaching partners to

ensure that the identified organization can offer and deliver the skills requested. This also allows the contributing partner to make a focused impact. Coalitions such as ABCT (Tanzania) benefit from in-country technical assistance offered by GTZ so that staff members can develop skills in key areas. This ensures that once the in-country support withdraws, coalition staff has the skills needed to continue operating the organization and support its sustainability.

Opportunities to make a significant impact

Based on the challenges faced by Business Coalitions in terms of funding and support and other topics relevant to sustainability such as strategic partnerships, this report identifies four areas where stakeholders can make a significant impact.

- *New funding opportunities*

Business Coalitions should explore and consider alternative and innovative funding models. TBCA (Thailand) is an example of a coalition that developed a new funding strategy by moving from a membership based model to a fees-for-services model. Companies believed they were not getting full value for their membership fees, and the coalition believed it was spending too much time and resource on services that did not meet its members' needs. One of the offerings TBCA developed was the development and accreditation of HIV management and workplace programmes to a silver or gold standard level in partnership with other national stakeholders. More details can be found in the "Activities and Services of Business Coalitions" chapter of this report.

The national AIDS standard in Thailand is being considered for development as an Asia-wide regional standard. APBCA (Asia-Pacific Business Coalition on AIDS) is taking the lead in such efforts. In the future, such a regional standard could help inform the development of an international standard. For more details, see the "Regional Business Coalitions Tackling AIDS" chapter of this report. National Business Coalitions all over the world could then be trained to accredit companies to an internationally recognized standard. This would provide coalitions with an additional revenue source. For TBCA, the switch from a membership

based to a fees-for-services model and the offering of accreditation of company AIDS management and workplace programmes, allowed the coalition to focus the needs of the private sector and generate new income.

Other funding mechanisms include charging for the use of assets Business Coalitions already possess such as materials for loan at reduced costs, office space for meetings and additional trainings to support implementation of toolkits.

Business Coalitions can also seek to develop and increase partnerships with international donors and governments, although some coalitions believe this comes at the price of losing independence.

- *Transfer of key skills*

Stakeholders should specifically target their support to the area(s) the Business Coalition specifically requires. Business Coalitions face a number of challenges in terms of funding and capacity. Business skills needed include strategic planning, project management, budgeting and marketing. As many of these skills are considered core competencies for most companies, there is an opportunity for the private sector to offer services to help coalition staff address these gaps. A dialogue with the private sector regarding gaps identified by the coalition could also reveal other areas in which the private sector has expertise that it could share with the coalition.

- *Developing strategic partnerships*

There is an opportunity for all stakeholders to develop strategic partnerships with national Business Coalitions and have an opportunity to shape their future.

- *Engaging SMEs*

Engaging SMEs has been particularly difficult for coalitions. The challenge of delivering reliable information in a sustainable manner requires creativity and flexibility in programming, given the diversity and size of the enterprises being targeted. This report identifies three ways in which Business Coalitions can support SMEs: partnership with organizations experienced in working with SMEs on HIV and AIDS workplace programmes, working with MNCs or large national companies to engage SMEs within company supply chains, and

partnering with national employers' federations and chambers of commerce.

Coalitions can partner with organizations experienced in working with SMEs on HIV and AIDS workplace programmes. An example of such a programme is BizAIDS (www.bizaids.org/www.iesc.org/ www.sabcoha.org.za). The goal of BizAIDS is to mitigate the impact of HIV/AIDS on income generating activities for very small businesses (typically with fewer than 10 employees), their owners, employees, families and the community. BizAIDS provides access to the specific business and health skills needed to manage the impact of HIV and AIDS in a work environment that is dramatically different to that of an MNC.

The objective of the programme is to enhance the survival of both the individuals and the business to insure stronger economic and social support for the community. BizAIDS is a locally driven programme, using local trainers and service providers to deliver tailored services to the SMEs. Training is customized to the local environment and is offered in both English and the local language.

BizAIDS operates in partnership with local businesses, community and faith-based groups covering prevention, testing and treatment. SABCOHA (South Africa) hosts the BizAIDS programme in South Africa, while BCHA (Swaziland) has been a partner in a pilot activity. BBCA (Botswana) is in discussions with BizAIDS and hopes to start a joint programme to reach SMEs in February 2008. Discussions on BizAIDS have also been held with NABCOA (Namibia). BizAIDS offers a well documented approach to addressing the needs of this often neglected sector of the economy.

NABCOA (Namibia) has also increased engagement with SMEs since 2006 through a new project with the PharmAccess Foundation and Awisa which specifically targets SMEs. NIBUCA (Nigeria) received money from the Global Fund to Fight AIDS, Tuberculosis and Malaria to support SMEs.

NIBUCAA (Nigeria) supports SMEs

NIBUCCA received a two-year grant (2007-2008) from the Global Fund to Fight AIDS, TB and Malaria (GFATM) to conduct a National Baseline Survey of the Private Sector Response to HIV/AIDS with a focus on SMEs in seven states and the Federal Capital Territory, Abuja. Field work started in November 2007.

NIBUCAA was also able to implement the GIPA initiative in five SMEs in Lagos with this funding. This involved empowering select persons living openly and positively with HIV to enhance their economic empowerment and put a face on HIV in the SMEs to which they are seconded as GIPA officers. GIPA Officers are expected to be the drivers of the HIV/AIDS Workplace Programme in the various collaborating SMEs. They receive a monthly stipend for two years in the first instance, and funds permitting, for three additional years.

So far 20, PLWH have been trained instead of 10. This resulted from NIBUCCA securing resources from the Strengthening National Response to HIV programme in Nigeria (SNR), UNAIDS, USAID-ENHANSE and the Society for Family Health (SFH), which is co-implementing the GIPA initiative in the north central state of Kaduna. Lagos and Kaduna are where the initiative is being piloted under the Global Fund Round 5 in Nigeria. SFH has also placed five GIPA Officers in five SMEs in Kaduna.

NIBUCAA is also expected to use GFATM resources to facilitate a linkage between public and private sector programmes as one of the three SRs under the National Agency for the Control of AIDS (NACA) and as one of the PRs in the implementation of the GFATM HIV Round 5 Objective 5.

For example, ABCT (Tanzania) and Standard Chartered Bank Tanzania are reaching out to SME banking customers, and Eskom and VW in South Africa are working with SABCOHA (South Africa) to engage their supply chains. The GHI partnered with several MNCs to develop best practice guidelines on how MNCs can better engage SMEs. The best practice guidelines and case studies can be downloaded from www.weforum.org/globalhealth.

Another effective channel employed by a number of Business Coalitions is the creation of partnerships with national employers' federations and chambers of commerce. As mentioned in the "Introduction to Business Coalitions" chapter, a number of coalitions benefited from the leadership of these organizations during their initial phases of development. Engagement with local employers' federations and chambers of commerce also provides opportunities for coalitions to reach business of all sizes, including SMEs.

Business Coalitions can also work with MNCs or large national companies to engage SMEs within company supply chains. These SMEs can be suppliers, distributors or customers of the MNC. Given the direct relationship between MNCs and the SMEs in their supply chains, there is an opportunity for MNCs to extend their HIV and AIDS workplace programmes to suppliers and distributors. A number of MNCs are already working with Business Coalitions to reach their supply chains.

■ Recommendations and Next Steps

Business Coalitions tackling AIDS have emerged at a phenomenal rate and are gaining global momentum. With four regional, 47 national and 10 emerging coalitions, the time is optimal for all stakeholders to take a step back and decide the future course of action. Some next steps are suggested for each of the major stakeholders.

Regional Business Coalitions

A group of four regional coalitions was brought together for the first time in November 2007 by the GHI. Preliminary discussions have already identified ways in which this group can work together in the future to create synergies among the regional and national coalitions, provide political leadership, help engage multinationals, share materials, knowledge, resources, and work towards developing and implementing global policies and standards to tackle AIDS in the workplace.

National Business Coalitions

For each national Business Coalition, there are 46 other coalitions in the same position and more that will soon join the network. Specific information on each coalition can be found through the profiling work that has been led by the GHI for coalitions all over the world¹. Key contact details are provided at the back of this report in the Worldwide Directory of Business Coalitions Tackling AIDS. These contacts enable national Business Coalitions to exchange information by calling, emailing and writing to each other. This network will provide for shared learning, the sharing of challenges, opportunities to seek advice and develop partnerships. The regional coalitions, as they develop and grow, will also be able to help tackle regional issues and concerns.

Emerging coalitions

For the 10 Business Coalitions planning to launch in 2008-2009 and for those in the embryonic stages, it will be important to understand what other coalitions have done. How are they structured? How are they financed and governed? How do they engage and serve the private sector? Who have they partnered with? What have been some of their challenges and successes? What model would best suit a new coalition? This report is intended to provide information about each of these issues and equip

Business Coalitions – experienced, new and emerging – with a network of resources. It is up to the participants to leverage these resources to seek out solutions and opportunities that are most relevant to specific environments.

The private sector

The private sector is urged to take a proactive approach to managing the potential business risk of AIDS today. Businesses that are serious about tackling AIDS at the workplace, but are unsure how to do this and need help should contact the coalition working in the country or countries in which they operate. If there is no national coalition, they should support the establishment of one in partnership with other businesses operating in the country. Established coalitions may be able to help companies assess needs and design, implement and monitor a workplace policy and programme as required. For specific information on the services provided by the coalition in a country or region, check out their organizational profiles on the GHI website² and contact them directly using the Worldwide Directory of Business Coalitions Tackling AIDS at the back of this report.

International donors and stakeholders

This report presents a clearer idea of some of the everyday challenges Business Coalitions face and areas where they need support. Donors and international organizations should be encouraged to prioritize offerings and support in the areas identified by the coalitions. They are also encouraged to provide targeted financial and technical support and hold coalitions accountable for results, as well as provide incentives for future funding and support for sustainability.

⁹ <http://www.weforum.org/en/initiatives/globalhealth/BusinessCoalitions/index.ht>

¹⁰ <http://www.weforum.org/en/initiatives/globalhealth/BusinessCoalitions/index.htm>

Global Health Initiative

Business Coalitions
Tackling AIDS

Worldwide Directory

January 2008

Regional Business Coalitions

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The relationship between international organizations and national Business Coalitions

This appendix details the nature of the relationship between UNAIDS Secretariat and national Business Coalitions as defined by UNAIDS, and between Corporate Council on Africa (CCA) and national Business Coalitions. For UNAIDS Secretariat, the list reflects the responses received from UNAIDS Country Offices to an internal mapping exercise they completed in July 2007. Because the exercise received a 75% response rate, UNAIDS apologizes for any relationship not reflected in the table below. The coalitions may also receive support from other international organizations not listed.

UNAIDS Secretariat support to national Business Coalitions

Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (UNAIDS Secretariat)
Algeria	Forum des Chef d'Entreprises (Algerian Business Coalition)	UNAIDS, in collaboration with ILO, is supporting the Algerian Business Coalition to provide a platform to work with the private sector. This includes mobilizing some key companies in Algeria around important interventions in the response to AIDS in a low prevalence country. Objectives include the integration of the private sector in the AIDS National Strategic Plan 2007-2011 and a concrete presence at the National AIDS Council.
Botswana	Botswana Business Coalition on AIDS (BBCA)	UNAIDS is currently supporting BBCA in documenting current practices of company/business response to the HIV/AIDS situation in Botswana.
Brazil	National Business Coalition (CEN)	UNAIDS has helped establish the national Business Coalition (CEN).
Caribbean	Caribbean Association of Industry and Commerce (CAIC)	UNAIDS is partnering with CAIC to reduce the prevalence and incidence of HIV/AIDS in the Caribbean, notably through disseminating information on the epidemic; developing HIV-sensitive workplace policies; public awareness for Caribbean managers and employees; developing national Business Coalitions; and, mobilizing private sector organizations to contribute management, marketing and other technical expertise to the HIV/AIDS response. CAIC is the coordinating body for the regional coalition, which includes the Business Coalitions of Jamaica, Barbados Guyana and Suriname.
Cambodia	Cambodian Business Coalition on AIDS (CBCA)	UNAIDS' role has been critical in setting up the CBCA as a leading private sector organization on AIDS in Cambodia. CBCA's objectives are to harness the power of the Cambodian business community to develop, support and implement policies and programmes for the prevention, care and treatment of HIV in Cambodia; to educate and disseminate knowledge on HIV/AIDS; and, to support workers living with HIV.
Chad	To be determined	UNAIDS will facilitate the establishment of a Business Council for HIV/AIDS.
Egypt	Egypt Business Coalition on AIDS (EBCA)	UNAIDS Egypt has helped create the Egypt Business Coalition on AIDS in 2006. This is the first Business coalition on HIV/AIDS in the Middle East and North Africa Region. UNAIDS, in partnership with the Egypt Business Coalition and other national partners, developed a Partnership Menu of options as a tool accessible to companies wishing to support the national response. UNAIDS also trained a pool of facilitators affiliated with local NGOs to provide workplace HIV training programmes for private company employees.



Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (UNAIDS Secretariat)
Ethiopia	Ethiopian Employers Federation	UNAIDS' strongest relationship within the business sector in Ethiopia is with the Ethiopian Employers Federation. The federation is active in the National Partnership Forum and has also recently become a member of the Global Fund's Commission on HIV/AIDS, TB and Malaria Issues (CCM). UNAIDS is strengthening its relationship with the Ethiopian Business Coalition Against HIV/AIDS and is currently supporting it to develop a publication showcasing best practice.
Fiji Islands	Fiji Business Coalition	UNAIDS Asia Pacific Leadership Forum on HIV/AIDS and Development (APLF) and the Australia/Fiji Business Council have agreed to form a Business Coalition in Fiji.
Gambia	To be determined	UNAIDS is supporting the process of establishing the Business Coalition by providing technical assistance and guidance. The objectives of the Business Coalition are to develop and implement policies and programmes for the management of HIV and AIDS, in line with national policy guidelines; to make available and accessible to all employees Workplace HIV and AIDS policies and guidelines; to plan for and allocate resources for the implementation HIV and AIDS prevention activities for staff; and, to protect the rights of HIV-positive workers.
Ghana	Ghana Business Coalition Against HIV/AIDS (GBCA)	UNAIDS chairs the technical team of the GBCA and has been critical in providing technical support in designing the constitution; supporting the launch of the Business Coalition; facilitating the engagement of the Business Coalition in the national processes; and, sharing best practice information.
Guinea	To be determined	UNAIDS and the National AIDS Council are discussing the setting up a Business Coalition on AIDS with support from SIDA Enterprises.
India	National Business Coalition on HIV and AIDS	UNAIDS is working with the Indian Business Coalition on HIV/AIDS to integrate HIV and AIDS-related sensitivity in private companies through workplace policies and to seek their cooperation in the larger HIV and AIDS programme in the country.
Ivory Coast	Coalition des Entreprises de Cote d'Ivoire contre le Sida (CECI)	<p>UNAIDS supports the CECI, which consolidates the main private sector organizations - the Chamber of Commerce and Industry of Ivory Coast, the Confederation Générale des Entreprises, the Ivorian Federation of Small and Medium Enterprises, as well as trade unions. CECI's objectives are to create a greater awareness by the world of work on issues related to HIV/AIDS, TB and malaria; to establish a platform for exchanges of experience; to coordinate the private sector's activities; and, mobilize of human and material resources for the implementation of activities.</p> <p>Following an initiative of the German Cooperation Agency GTZ, with the support of UNAIDS and of Family Health International, CECI has developed a unique integrated programme, TOP PERFORMANCE, a reference tool for implementing HIV related activities.</p>
Jamaica	Jamaica Business Council on HIV/AIDS	UNAIDS provides technical and financial support to the Jamaica Business Council on HIV/AIDS. The council provides access to 24 large companies in Jamaica. It also allows UNAIDS to influence HIV policy and programme standards in companies and to assist in the overall private sector response to HIV in Jamaica.
Lesotho	Association of Employers and Employees (ALE)	UNAIDS is providing technical support for the alignment of the Association of Employers and Employees' strategic plan to the recently completed National AIDS Council Operational Plan.
Mexico	Consejo Nacional Empresarial sobre SIDA (CONAES)	<p>UNAIDS is supporting activities of the Consejo Nacional Empresarial sobre SIDA (CONAES), which brings together some of the largest private employers in Mexico to intensify efforts to end HIV/AIDS-related stigma in the workplace.</p> <p>The effort was spearheaded by a public-private partnership between the founding companies and civil society organizations, as well as the US Agency for International Development (USAID) and Mexico's Centro Nacional para la Prevención y Control VIH/SIDA/ITS (CENSIDA).</p>

Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (UNAIDS Secretariat)
Mozambique	ECOSIDA - Association of Business against AIDS	UNAIDS has regular and ongoing contact with ECOSIDA. Priorities include expanding current activities in the workplace (support with strategy development and trainings, access to condoms, etc.), communication and advocacy (national awareness campaigns), research (looking at impact of AIDS in the workplace and access to treatment through the private sector), monitoring and evaluation, and institutional capacity development.
Namibia	Namibia Business Coalition on AIDS (NABCOA)	UNAIDS facilitated the establishment of NABCOA in 2002. The objective was to achieve coherent and coordinated mobilization of the Namibian private sector on AIDS. One of the key achievements of the coalition is the launch of a HIV/AIDS toolkit for SME managers developed by NABCOA with UNAIDS funding. NABCOA has succeeded in keeping AIDS high on the strategic agenda of many private companies in Namibia. It has become a reference on HIV/AIDS workplace programmes and represents the private sector in the Country Coordination Mechanism of the Global Fund to Fight AIDS, Tuberculosis and Malaria.
Nepal	Business Leadership Forum on AIDS	Among other activities, UNAIDS helps the Business Leadership Forum on AIDS mobilize the business sector on workplace programmes and to support People Living with HIV.
Nigeria	Nigeria Business Coalition Against AIDS (NIBUCAA)	UNAIDS supports NIBUCAA in various ways: through technical assistance for the development of NIBUCAA's five-year business plan 2006-2010, in the context of the Public Private Partnership Forum, and by participating in or facilitating the Business Coalition's activities. Together with the Network of PLHIV in Nigeria - NEPWHAN, UNAIDS and NIBUCAA have developed the Nigeria GIPA Programme, resulting in the recruitment of PLHIV experts to support HIV/AIDS workplace programmes in companies.
Pakistan	To be determined	UNAIDS, in collaboration with ILO, intends to form a business coalition on HIV & AIDS.
Papua New Guinea (PNG)	the PNG Business Coalition against HIV and AIDS	UNAIDS is working closely with the Papua New Guinea Business Coalition against HIV and AIDS, a non-profit organization representing the private sector to address AIDS in Papua New Guinea.
Philippines	Philippines Business for Social Progress (PBSP)	UNAIDS is working with the Philippines Business for Social Progress as its link to the private sector.
Sierra Leone	To be determined	UNAIDS supported the launch of the Sierra Leone HIV/AIDS Business Coalition. The objectives of the Business Coalition are to encourage 75% of businesses to put in place programmes on HIV/AIDS and also adopt the National HIV/AIDS Workplace Policy targeting their employees/staff and dependants; to establish a forum to dialogue; and, to mobilize additional resources targeting small businesses.
South Africa	South African Business Coalition on HIV and AIDS (SABCOHA)	UNAIDS works in partnership with the South African Business Coalition on HIV/AIDS (SABCOHA) to strengthen the business response to the AIDS epidemic. Through SABCOHA, UNAIDS supports the business sector to implement the South African National AIDS Strategic Plan (2007-2011), which defines the role of business in the national response. In 2006 UNAIDS supported the strengthening of a toolkit developed by SABCOHA to support micro, small and medium enterprises in responding to the challenge of AIDS in the workplace. There is also continuous sharing of information through meetings, workshops and conferences.
Swaziland	Business Coalition on AIDS (BCHA)	UNAIDS is a member of the Steering Committee of BCHA. UNAIDS provides strategic guidance, shares experiences and provides funds for developing the BCHA Strategic Plan, the Menu of Partnership Options, and for the adoption of the South African business Coalition on AIDS (SABCOHA) SME Outreach Tool Kit.
Tanzania	AIDS Business Coalition of Tanzania (ABCT)	UNAIDS was instrumental in establishing the coalition with the ILO in 2004. It is now run by UNDP.



Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (UNAIDS Secretariat)
Uganda	Uganda Business Council on HIV/AIDS (UBCOA)	<p>UNAIDS supports UBCOA through facilitation, information and knowledge dissemination, policy guidance, tracking the epidemic, development and dissemination of best practices, and advocacy.</p> <p>UBCOA is open to all private sector members and currently consists of 47 member organizations. The Uganda AIDS Commission (UAC), the Ministry of Health, UNAIDS and its co-sponsors represent the public sector. Representatives of interested bilateral organization and NGO's are also welcomed.</p> <p>UBCOA intends to share its experience, including workplace policies, with interested companies - particularly smaller ones. In addition, the council intends to expand private/public sector partnerships, for example by contributing to HIV/AIDS healthcare delivery through insurance schemes and company clinics. Finally, UBCOA aims to assist HIV/AIDS related projects, mainly through in-kind support.</p>
Zambia	Zambia Business Coalition on HIV and AIDS (ZBCA)	<p>UNAIDS, under the leadership of ILO, provides technical assistance and advocacy support as needed to the ZBCA. The National AIDS Council has developed partnerships with various private/business sector partners through the ZBCA and the Zambia Workplace AIDS Partnership (ZWAP). ZWAP is composed of key partners working on HIV in the private sector including about 100 private companies, the ZBCA and NGOs. The ZWAP represents the voice of the Business Forums which are composed of associations (such as the farmers association, the association of small & medium-sized enterprises, etc.)</p>
Zanzibar	AIDS Business Coalition of Zanzibar (ABCZ)	<p>UNAIDS was instrumental in establishing the coalition, with the ILO, in 2006.</p>

Corporate Council on Africa (CCA) support to National Business Coalitions

Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (CCA)
Democratic Republic of Congo	Le Comité Intra-Entreprises pour la Lutte contre le SIDA (CIELS)	<p>CCA has provided direct technical assistance to CIELS for the past three years. Despite the fact that CIELS has been in existence since 2003, has strong support from the National AIDS Commission, and has a diverse membership base, management capacity within the Secretariat and the need for a more precise menu of services continue to thwart the effectiveness of the organization. The fact that the central coalition in Kinshasa does not effectively communicate with its offices throughout country also limits the impact of the organization.</p> <p>To address these challenges, CCA has worked closely with the members of the CIELS Secretariat and Board of Directors to create a plan of action for 2008 that includes strategies for human resource capacity building, development of a more focused menu of services, and adaptation of an internal monitoring and evaluation plan to address coalition weaknesses. Most recently, CCA has facilitated a training session during which AIAfrica Global Media assisted CIELS in the development of a communications platform for the coalition using open source technology. The purpose of this tool is to improve communication capabilities among regional coalition representatives.</p>
Ghana	Ghana Business Coalition against HIV/AIDS (GBCA)	<p>Although the GBCA is very young and needs to finalize its strategic plan and build its internal capacity, it has a strong technical and financial support base, as well as the creativity and vision needed to successfully expand the private sector response to HIV/AIDS in Ghana. CCA assisted the coalition to finalize its five-year strategic plan, identify options for mobilizing membership, and explore partnerships with community-based organizations with existing services that the coalition can leverage to complement coalition activities.</p>

Location	Name of the Business Coalition on HIV/AIDS	Nature of the relationship (CCA)
Ghana	Ghana Business Coalition against HIV/AIDS (GBCA)	CCA will provide ongoing assistance in the elaboration of the strategic plan and eventual creation of an annual work plan, as well as continue to facilitate the development of public-private partnerships between the coalition and NGO, business and donor stakeholders.
Mali	La Coalition du Secteur Privé dans la lutte contre le SIDA (CSP VIH/SIDA)	<p>CCA has worked with the CSP VIH/SIDA coordinator to develop a 2007-2008 coalition action plan and communications strategy to leverage existing technical and financial resources, attract new members and diversify coalition financing.</p> <p>Federations, SMEs and non-profit organizations (NGOs) were not initially incorporated into the coalition, so CCA assisted the coalition to develop partnerships with these organizations to develop a more coordinated private sector response and serve the needs of coalition members in developing programmes, training personnel, and providing counseling and testing and treatment services. CCA also explored options for a coordinated strategy to engage the informal sector in the national private sector HIV/AIDS strategy.</p>
Mauritania	La Coalition d'Entreprises Mauritaniennes Contre le VIH/SIDA (CEMA-VIH/SIDA)	<p>In 2006, CCA, in collaboration with the World Bank, assisted the National AIDS Commission and a private sector consultant to draft the terms of reference of the Mauritanian national Business Coalition against HIV/AIDS and define long- and short-term strategies focused on membership mobilization, communication strategy, service delivery, tools provision, income generation and financial sustainability.</p> <p>CCA also worked with the coalition and the National AIDS Commission to develop a coordinated strategy to reach the national target of 10% of private sector employees tested for HIV by 2009. CCA continues to support the coalition as the organization looks for ways to diversify its membership and funding sources and to engage PLWHA.</p>

Acronyms Used in the Report

ABCAR	AIDS Business Coalition in the Arab Region
ABCT	AIDS Business Coalition Tanzania
ACCA	AIDS Control in Companies in Africa
ACTafrica	AIDS Campaign Team for Africa (World Bank)
AECV-B	Action des Entreprises Contre le VIH/SIDA au Burkina-Faso
AFBI	AIDS Foundation of Barbados
AIDS	Acquired Immune Deficiency Syndrome
APBCA	Asia-Pacific Business Coalition on AIDS
ALO	Arab Labour Organization
APELAS	Association du Prive et Para-Etatique dans la Lutte contre le VIH/SIDA
ART	Antiretroviral Therapy
ARV	Anti-retroviral
ASO	AIDS Standard Organization (Thailand)
AusAID	The Australian Government's overseas aid program
BC(s)	Business Coalition(s)
BBCA	Botswana Business Coalition on AIDS
BCAS	Business Coalition on AIDS in Singapore
BCHA	Swaziland Business Coalition against AIDS
CAIC	Caribbean Association of Industry and Commerce
CBA	Cost Benefit Analysis
CBCA	Cambodia Business Coalition on AIDS
CBO	Community Based Organizations
CCA	Corporate Council on Africa
CCA=SIDA	Coalition of Community Affairs for AIDS, TB and Malaria
CD4	Cluster of Differentiation 4
CDC	Centers for Disease Control
CEBAC	Coalition des Entreprises béninoises et Associations Privées pour la Lutte contre le VIH/SIDA, le Paludisme la Tuberculose
CEC	Caribbean Employers Federation
CECI	Coalition of Ivorian Businesses Against HIV/AIDS
CEMA-VIH/SIDA	Comite National de Lutte Conte le SIDA Secretariat Executif
CEN	Conselho Empresarial Nacional Para Precencao Ao HIV/AIDS Brasil/Brazilian Business Council on HIV/AIDS Prevention
CEO	Chief Executive Officer
CFO	Chief Financial Officer
CII	Confederation of Indian Industry
CIELS	Le Comité Interentreprises de Lutte contre le VIH/SIDA
CLL	Caribbean Congress of Labour
CNPM	Confederation Nationale des Patronats Mauritanien
CONAES	Consejo Nacional Empresarial sobre VIH/SIDA (Mexico)
CSP	Coalition du Secteur Privé au Mali dans la Lutte contre le VIH/SIDA
DFID	UK Department for International Development
ECoSIDA	Associação Moçambicana de Empresarios contra o sida (Mozambique)
EBC	Egypt Business Coalition on HIV/AIDS
EBCA	Ethiopian Business Coalition Against AIDS
FBO	Faith Based Organizations
FICCI-SEDF	Federation of Indian Chambers of Commerce and Industry- Socio-Economic Development Foundation
FSE&CC	Federation of Swaziland Employers and Chamber of Commerce
FUNDEC-VIH	Fundación de Empresas Comprometidas con el VIH (Guatemala)
HIV	Human Immunodeficiency Virus
GBC	Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria
GBCA	Ghana Business Coalition against HIV/AIDS
GFATM	Global Fund to fight AIDS, Tuberculosis and Malaria
GHAIN	Global HIV/AIDS Initiative Nigeria
GHARP	Guyana HIV/AIDS Reduction & Prevention Programme
GHI	Global Health Initiative (of the World Economic Forum)
GTZ	Deutsche Gesellschaft für Technische Zusammenarbeit
IBCA	India Business Coalition on AIDS



IBCA	Indonesia Business Coalition on AIDS
IBT	India Business Trust
IESC	International Executive Service Corps
IFC	International Finance Corporation
ILO	International Labour Organization
IOE	International Organisation of Employers
ISO	International Standards Organization
ITUC	International Trade Union Confederation
JaBCHA	Jamaica Business Council on HIV/AIDS
KHBC	Kenya HIV/AIDS Business Council
MBCA	Malawi Business Coalition Against AIDS
MBCA	Myanmar Business Coalition on AIDS
MNC(s)	Multinational Companies
NABCOA	Namibia Business Coalition on AIDS
NAC	National AIDS Committee/ Coordinating body/ Council / Commission
NBA	National Business Alliance (Indonesia)
NBC	National Business Coalition
NERCHA	National Emergency Response Council on HIV/AIDS
NGOs	Non Governmental Organizations
NIBUCAA	Nigeria Business Coalition on AIDS
NORAD	Norwegian Agency for Development Cooperation
OIs	Opportunistic Infections
PABC	Pan-African Business Coalition
PANCAP	Pan-Caribbean Partnership Against HIV/AIDS
PCBC	Pan-Caribbean Business Coalition on AIDS
PEPFAR	President's Emergency Plan for AIDS Relief
PLWHA	People Living with HIV/AIDS
PNG BAHA	The Papua New Guinea Business Coalition Against HIV and AIDS
PPPs	Public-Private Partnerships
SANS	South African National Standards
SABCOHA	South African Business Coalition on HIV/AIDS
SBCAA	Sudanese Business Coalition against AIDS
SME(s)	Small and Medium Sized Enterprise(s)
SMME(s)	Small, Medium and Micro Enterprise(s)
SSA	Sub-Saharan Africa
STDs	Sexually Transmitted Diseases
TB	Tuberculosis
TBCA	Thailand Business Coalition on AIDS
TERI-BCSD	The Energy and Resources Institute - Business Council for Sustainable Development
UBC-HIV/AIDS	Uganda Business Coalition on HIV/AIDS
UNAIDS	Joint United Nations Program on HIV/AIDS
UNDP	United Nations Development Programme
UNODC	United Nations Office on Drugs and Crime
US	United States
USAID	United States Agency for International Development
VCBA	Vietnam Business Coalition on AIDS
VCT	Voluntary Counselling and Testing (HIV/AIDS)
VSO	Voluntary Services Overseas
VWSA	Volkswagen South Africa
WB	World Bank
WBCSD	World Business Council for Sustainable Development
WGs	Working Groups
WHO	World Health Organization
WPB	Workplace Policy Builder
WPP(s)	Workplace Programme(s)
ZBCA	Zambia Business Coalition on HIV/AIDS
ZBCA	Zimbabwe Business Coalition on AIDS
ZWAP	Zambia Workplace AIDS Partnerships



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