Over more than 15 years Avert supported 20+ organisations across Southern Africa and India – recognising the key role played by community-based organisations in the HIV response. Many thousands of people received vital support and services as a result of their work and our funding. Below are highlights of the incredible organisations and work we supported between 2005 and 2020:

**Umunthu Foundation in Malawi**

Our work with the Umunthu Foundation spanned 10 years. During this time we worked together to establish Umunthu Foundation as a credible local HIV and gender rights community organisation. Our funding allowed Umunthu Foundation to work with the two local government clinics in the area, providing staff to support the daily HIV testing of pregnant mothers. To ease the burden on the two government clinics, Avert supported Umunthu to establish an HIV testing, treatment and care clinic at its office base which was ideally located between the two government clinics. Over the course of four years the clinic achieved registration and then an award of excellence, establishing it firmly in the community as a trusted place of quality care. The clinic now regularly cares for just over 400 people with HIV, and tests over 100 people every month.

Umunthu also used Avert funding to build a very much needed waiting-mothers shelter and consultation rooms at one of the local government clinics which helped boost attendance and retention in care.

Although we are no longer providing grant support to Umunthu we are still working with them providing technical support to a HIV mother and baby programme they are implementing with the support of ViiV Healthcare Positive Action grant.
Without Umunthu we wouldn’t know our HIV status and we wouldn’t have any support.

- Young person accessing Umunthu’s clinic

**Bwafwano Integrated Services Organisation (BISO) in Zambia**

BISO are a well-established community organisation working in Lusaka and Mkushi, a rural underserved district. We worked with BISO for five years, initially supporting them with the implementation of a Comic Relief-funded project to increase TB and HIV screening and then with Avert support to address the needs of vulnerable young people in Mkushi. The project worked with community peer educators who were based at the rural health centres and within the local schools to reach young people, helping them get the life skills and HIV awareness they needed to live healthily. The project also engaged community leaders to challenge social and cultural beliefs that drive HIV, such as intergenerational sex and transactional sex. Over the course of three years, over 5,000 young people participated in the project, of which over 80% tested for HIV and engaged in clinic services.

**Phelisanang Bophelong (PB) in Lesotho**

PB is a well-respected community organisation led by people living with HIV. We first started working with PB in 2015 after they responded to an open call for grants to support youth engagement projects. PB’s proposal encouraged young people in Leribe district to access HIV services and engage in sexual health.

Over the next five years we supported PB to address three key areas: improve young people’s access to youth-friendly HIV services; motivate young lesbian, gay, bisexual and transgender (LGBT) people to engage in sexual health programmes; provide young prison inmates with HIV prevention and care services.

During the programme, PB trained over 100 peer community-based volunteers who are now based at a number of the health centres across the district and able to support with HIV testing and youth sexual health awareness sessions. They held the first ever Gay Pride event in the district and provided diversity training to local government officials.

PB also started to run father-son and mother-daughter camps which provided a safe space for young people to engage their parents and guardians in sexual health which is usually considered a taboo. These camps proved to be hugely successful in the district and are still running.

**Sisonke project in South Africa**

We started working with the Diocese of Grahamstown’s Department of Social Responsibility in 2004, at a time when the HIV epidemic was causing a crisis in family structures and leaving hundreds of thousands of children orphaned. The Diocese set up the Sisonke project with our support to respond to the orphan crisis and the impact this was having on grandparents. Over the next 12 years Avert
supported the Sisonke project to run a number of activities that would ensure grandparents were better equipped to meet the needs of their orphaned grandchildren – supporting them with community nutrition and income support projects, a community centre, early childhood development and education training, legal guidance, and physical and mental health support. The project was wound-down after nearly 14 years as the orphaned children grew up into adulthood and the needs of the grandparents and the wider community changed.

**Future support**

While Avert is no longer funding community-based organisations through this type of grant support, we are continuing to partner with, and invest our own funds in, digital communication projects with local and national organisations in areas hard hit by HIV. You can find out more about our current projects and partners [here](#).

The decision to withdraw from grant-making support was taken following a full strategy and financial review – looking at what our partners had achieved, where we could best add value to the HIV response, and what role others are playing. We recognised that there were many others in this field better placed than us to carry out this grant-making work and that by developing a clear strategy focused on our work as a health communications organisation we would be able to continue to work alongside community-based organisations with greater impact. Following a three-year exit planning process with our community-based partner organisations, 2019-20 marked our final year as a grant-maker.

*Photo credit: ©Corrie Wingate for Avert. Images used on this site are for illustrative purposes only. They do not imply any health status or behaviour on the part of the people in the photo.*

Last full review:
02 September 2021