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Social Aspects of HIV/AIDS Research Alliance (SAHARA)

SAHARA – an active and effective collaboration network

SAHARA is a multi-country alliance of partners established to conduct, support and use social science research to prevent the further spread of HIV and mitigate the impact of its devastation. SAHARA's vision therefore remains that of influencing policymaking and programme development through the promotion and dissemination of the evidence adduced from such collaborative research. Its mission is to improve the quality of data used to plan and implement interventions; to contribute to the effective utilisation of resources; and to provide multimedia and conference platforms for the exchange of ideas and the spread of new knowledge.

To achieve its vision, SAHARA undertakes multi-country and multi-site research, the outcomes of which are widely disseminated through its network of researchers, policymakers and practitioners, a biennial Africa-focused conference, a website and a journal, with a view to making a significant contribution to evidence-based policy formulation and practice.


The SAHARA networking objective also manifests itself in numerous meetings and consultations such as with the UNAIDS SADC HIV Unit; UN WHO West Africa; African Union initiatives; national AIDS councils in Senegal, Kenya, Rwanda and Uganda; UNIFEM and UN Habitat in East and Central Africa, and other UN agencies. The conclusion and operationalisation of memoranda of understanding (MoU) with CODESRIA and NEPAD has opened up further avenues for collaborative activities.

SAHARA has been tasked with leading the social science agenda on the implications of the scaling up of male circumcision as an effective prevention technology following the research evidence from three randomised controlled trials in Kenya, South Africa and Uganda.

Completed research Strategy for the care of orphans and vulnerable children (OVC)

This five-year project, the single biggest project in SAHARA and indeed the HSRC, was funded by the WK Kellogg Foundation in 2002 and largely involved three southern African countries, namely South Africa, Botswana and Zimbabwe and, to a lesser extent, three other countries, Lesotho, Swaziland, and Mozambique. Its main aim was to gather evidence-based best practices of interventions to improve the conditions of OVC. At the end of the project such best practice OVC interventions were identified and recommended to sub-Saharan African countries and adopted by various community-based organisations (CBO) and faith-based organisations (FBO) at community level through until the end of 2006 when the project began to wind down. The research generated three articles published in international peer-reviewed journals, and over 20 research reports from all three countries published by the HSRC Press to date, with four more still in press at the time of writing this report.

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Participants at the 4th SAHARA Conference in Kisumu, Kenya

Impact of recently completed research

The Study on OVC has clearly influenced both the South African and Southern Africa Development Community (SADC) OVC Care and Support Strategy. The concrete evidence from this study has been the incorporation of some of the recommended interventions into the 2007 – 2011 National Strategic Plan for South Africa and other African countries. Furthermore, the OVC census methodology developed from the study and tested successfully in South Africa, Botswana and Zimbabwe has attracted much interest as an innovative strategy for studying this serious problem in other countries of southern Africa.

Ongoing research projects

Stigma and behavioural risk-reduction interventions

This project is funded by the UK Department for International Development (DFID), the Canadian International Development Agency (CIDA) and the Directorate-General for International Cooperation (DGIS). It was first initiated in the SADC region (namely, Botswana, Lesotho, South Africa and Swaziland) with both DFID and CIDA funding, and was later expanded to include Kenya, Rwanda, Burkina Faso and Senegal through DGIS funding.

The project aims to adapt and test the effectiveness of two behavioural risk reduction interventions, Healthy relationships and Options for health that were developed and shown to be efficacious in the USA, and aimed at people living with HIV/AIDS (PLWHA) who are aware of their HIV-positive status. To date, formative and baseline survey research has been undertaken in all eight countries and seven of the draft reports that will form part of the eight-country report are nearly completed.

In addition, two publications from South Africa have been published in international peer-reviewed journals. One manuscript from Botswana, three more from South Africa, and one from South Africa, Swaziland and the USA have also been submitted for publication in international peer-reviewed journals. Substantial progress has been achieved in the southern Africa region as expected. This includes the cultural adaptation of the two interventions and training-of-trainers which were conducted by the original developers of the two interventions from the USA.

Since then the Botswana research team successfully completed the feasibility and acceptability study of Healthy relationships on three groups during November 2006 and have since the beginning of 2007 undertaken a fully randomised control trial (RCT) consisting of 10 intervention and 10 control groups. Three-month follow-up assessments of behavioural outcomes of the 20 groups in the two arms of the trial will be completed in July 2007. Meanwhile, preparations for the feasibility and acceptability study as well as a randomised controlled trial of Options for health in Cape Town are at an advanced stage.

Preliminary impact of study

The work that SAHARA has undertaken has elicited a great deal of interest and has had a significant positive impact on prevention throughout Africa. The Botswana team's project represents the first time the Healthy relationships intervention has been implemented outside of the USA. Preliminary work based largely in Botswana, but also in South Africa, has laid a good foundation for a bigger RCT, funded by the US President's Emergency Plan for AIDS Relief (PEPFAR), on the effectiveness and appropriateness of both interventions to be conducted by the South African team in the Eastern Cape Province during 2007 and 2008. As with the OVC intervention strategies, the incorporation of some of the recommended interventions into the 2007 –

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2011 National Strategic Plan for South Africa provides the most visible evidence of the impact of this work.

Poverty and HIV/AIDS

This groundbreaking study into the impact of HIV/AIDS on households with someone living with HIV/AIDS is funded mainly by DGIS. Formative and baseline survey research was conducted in households affected by HIV/AIDS in six countries in sub-Saharan Africa – South Africa and Botswana in southern Africa, Kenya and Rwanda in East and Central Africa and Burkina Faso and Senegal in West Africa. Preliminary findings were presented at the 4th Social Aspects of HIV/AIDS conference held in Kisumu, Kenya from 30 April – 3 May 2007 and will soon be published as a research report by the HSRC Press.

Other SAHARA research

The West African region also undertook three additional studies as follows:

- A study on contraceptive methods and the use of condoms in Senegal, funded by an international NGO known as the Centre for Development and Population Activities (CEDPA). The study report was presented in September 2006;
- A study on HIV/AIDS and democratic governance in Senegal, supported by the Institute for Democracy in South Africa (IDASA); and
- An exploratory study on cultural approaches to HIV/AIDS prevention, commissioned by *Bureau Regionale pour l'Education en Afrique* (BREDA), the West Africa Regional Office of the United Nations Education, Scientific and Cultural Organisation (UNESCO).

SAHARA was also recently identified as a key regional resource in Africa and partner with the WHO and UNAIDS to lead both the development and implementation of a social science research agenda on the scaling up of male circumcision as an HIV prevention strategy in Africa.

SAHARA collaborative information sharing SAHARA conference

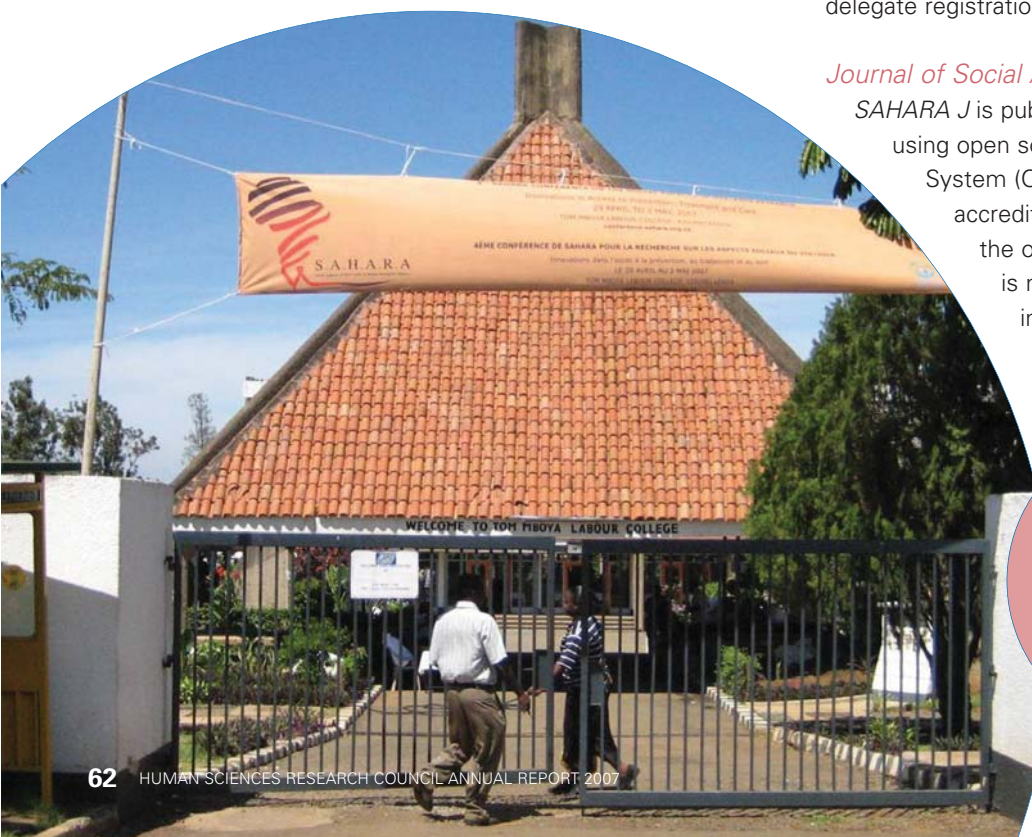
The 4th SAHARA conference was held in Kenya and over 400 delegates from more than 25 countries attended, including policymakers, scholars, researchers, advocacy groups, NGOs and CBOs, all united in their desire for innovative ideas regarding improved access to prevention, treatment and care. The conference theme, Innovation in access to prevention, treatment and care in HIV/AIDS, was well reflected in the diversity of scientific presentations which included community-based initiatives in dealing with HIV/AIDS and its consequences. UNESCO, as one example, convened a roundtable of Parliamentarians, to promote high-level policy discourse on HIV/AIDS on the African continent. The proceedings of the 3rd SAHARA conference Dakar 2005 were published in paper and compact disc form.

SAHARA website

The SAHARA website is now hosted at the HSRC, which has brought stability to the site. The website has undergone software and security upgrades including installation of Google Analytics to give SAHARA access to reliable statistics that are comparable to other sites. The site contains databases of information such as projects, almost 100 links to other relevant sites, and the stigma abstracts database. SAHARA makes use of the Open Conference System (OCS) for conference management. OCS was successfully used for the Dakar conference in 2004, and the Kisumu conference in 2007 for online delegate registration.

Journal of Social Aspects of HIV/AIDS (SAHARA J)

SAHARA J is published online at journals.sahara.org.za, using open source software called Open Journal System (OJS). The journal is internationally accredited and cited on AJOL-SAHARA J. It is the only journal that has full text articles and is now cited on PsycINFO. It is abstracted in Sociological Abstracts, and Bibliographic Databases



The entrance to the Tom Mboya Centre in Kisumu, Kenya, where the 4th SAHARA Conference was held

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(EMBASE/EMNursing/Compendex/GEOBASE/Moby Yearbooks and Scopus). The journal is indexed in IBSS, and is also accredited for subsidy as a SAPSE journal by the Department of Education, South Africa.

Capacity development

SAHARA recognises the imperative to develop young researchers, both for its own sustainability and for the continued viability of HIV/AIDS research. For this reason, capacity development workshops for young scholars were held in West, East and Central African regions, and as part of the SAHARA conference in Kenya.

As of the end of March 2007, SAHARA had over 40 social science scholars variously supported by the network.

Future developments

The achievements of SAHARA are numerous and its impact on HIV and AIDS policy and programme development is evident. The network continues to expand as new country focal persons or institutions are identified with the aim of having a SAHARA focal person in each sub-Saharan African country. Equally, however, challenges exist that must be overcome, such as the challenge to mobilise sufficient resources to meet the ever increasing demands for networking, research and capacity building in social science research generally, and in HIV/AIDS research in particular.



Specialist researchers 2006/07

Dr Vincent Agu

Director (from 1 August 2007)
DRPH, University of Texas
Advocacy, HIV vaccine research and development, social aspects of HIV vaccines



Professor Akim Mturi

PhD, University of Southampton
HIV/AIDS, sexuality, reproductive health and fertility

