During a workshop held in 2001 with Novib partners in Ethiopia, the participating organizations gave the impression that they were doing a lot for their personnel in raising awareness and could not see the need for internal mainstreaming and policy guidelines. Though some organizations were undertaking activities to decrease the stigma around HIV/AIDS in the communities in which they worked, the silence and the stigma associated with HIV/AIDS were very high in their own organizations. A few organizations had already lost some employees to AIDS by then.

The importance of HIV/AIDS internal mainstreaming was better recognized during a discussion carried out in 2003 between Novib and several organizations, including those who participated in the previous workshop. The partners expressed the dilemma they faced in helping and serving their communities and educating the public when they were themselves not sufficiently equipped with the necessary capacities to respond to HIV/AIDS. Thus the partners showed their willingness to get help with mainstreaming HIV/AIDS internally. Subsequently, 14 partners of the four organizations were selected to participate in this project.

The overall goal of the project is to improve the capacity of local partners to deal with the effects of HIV/AIDS at the organizational level. The main tool used is the ‘Framework for Organizational Diagnoses on HIV/AIDS Competency’, also known as ‘the 12 Box Model’, which assists organizations in mainstreaming HIV/AIDS (see Box). This framework, developed by Novib, can be used in a self-assessment workshop to identify strengths and weaknesses of an organization with regards to internal mainstreaming. The framework was pre-tested in Ethiopia with several Novib counterparts.

Self-assessments
In May 2004, a preliminary workshop was conducted with all the 14 organizations to introduce the project. Afterwards, tailor-made self-assessment workshops were facilitated based on the 12 Box Model. The management, senior and junior staff participated in these workshops conducted by individual organizations. Eleven of the 14 organizations carried out individual self-assessment workshops; the other three organizations did not continue with the self-assessment and the rest of the process for various reasons.

Based on the results of the workshops, each organization developed an action plan. Planned activities ranged from training needs assessments, staff awareness sessions, experience-sharing visits to peer organizations, making condoms available in the office, offering VCT services to staff, developing HIV/AIDS policies and mainstreaming guidelines, adapting other organizational guidelines like staff manuals and job descriptions, to preparing proposals to donors for future funding.

The participating NGOs appointed focal persons or committees, both at head office and field office level, who are responsible for the overall coordination of the activities. In the implementation phase, all NGOs made use of external consultants or resource persons to assist them in the development of organizational policies or facilitating staff training. There was a strong emphasis on the input from staff during policy development.

Lessons learned
The following reflections and lessons could be drawn from the participating NGOs:

- NGOs reported that their staff was eager to have a workplace policy. One of the NGO directors felt that a policy would be an important tool to retain staff within the organization.
- The fear of stigma and discrimination challenges the NGOs in this process. “Even when educated you don’t feel comfortable disclosing; you fear discrimination. In the absence of a workplace policy, I would rather buy my own medicine than disclosing my situation to the organization” (focal person).
- Some NGOs reported resistance from...
The 12 Box Model

The 12 Box Model helps in getting insight into the HIV/AIDS competency of organizations and understanding their strengths and weaknesses regarding HIV/AIDS mainstreaming. It was adapted from a gender-mainstreaming model, and based on experiences of gender mainstreaming. This model had originally three key organizational elements: 1) vision and mission, 2) organizational structure and systems, and 3) human resources. An additional dimension, i.e. programme policy and practice, was added during the adaptation, in order to include the analysis of external mainstreaming. The framework guides the assessment of HIV/AIDS competence of organizations from governance, technical and cultural points of view in a systematic way.

In using the framework, organizations reflect on their practice using checklists (concrete questions) prepared on each of the 12 boxes. The assessment is better done in group discussions and with the participation of all staff. Commitment and full participation of management is crucial. The process helps identify the strengths and weaknesses of organizations as well as opportunities and threats, and leads to the prioritization of immediate problems that organizations want to respond to based on subsequent action plans.

Currently, Novib is refining the 12 Box Model.1

<table>
<thead>
<tr>
<th>Key organizational elements</th>
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<tr>
<td>I. Vision/mission</td>
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<td>II. Organizational structure</td>
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<tr>
<td>III. Programme policy and practice</td>
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<td>IV. Human Resources</td>
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<tr>
<th>Viewpoints</th>
<th>Governance (political)</th>
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<tr>
<td>Decision-making on HIV/AIDS</td>
<td>Decision on internal HIV/AIDS policy</td>
<td>Tasks and responsibilities</td>
<td>Cooperation and learning</td>
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<tr>
<td>Decision on HIV/AIDS policy</td>
<td>Decision on HIV/AIDS mainstreaming in programmes</td>
<td>Programmatic issues including monitoring and evaluation</td>
<td>Organizational culture (communications, relations, etc.)</td>
</tr>
<tr>
<td>Human resource planning</td>
<td></td>
<td>Staff and expertise</td>
<td>Approach, attitude towards target group (participatory)</td>
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Lessons learned
- A self-assessment provides NGOs with a good head start/insight into basic issues that internal mainstreaming should address.
- It helps them to identify present strengths and weaknesses in their internal response to HIV/AIDS and the subsequent action that is needed.
- In planning, they need to carefully consider issues like staff acceptability and involvement as well as embedding internal mainstreaming activities in their organizational structures to ensure sustainability.
- staff: some members of staff were tired of hearing about HIV/AIDS; others resisted the idea of having condoms at the workplace or going for VCT. Others were positive after going through the exercise. “I thought the training was going to be boring, thinking I knew all about HIV/AIDS but I actually learned new things and found the training very interesting” (focal person).
- NGOs organized regular open dialogue sessions or social events to break the silence on HIV/AIDS and strengthen mutual relationships. A number of NGOs reported that staff became more open in discussing HIV/AIDS issues, something that is not all too common in the Ethiopian culture. “I told you that my aunt was sick. That is a very shameful thing according to our Ethiopian culture; I am now ready to help the HIV patients, in any case, even if I am asked to contribute a part of my salary I am not retreating” (finance manager).
- Two NGOs that had included the option for VCT in their action plan, reported that already some of their staff had taken this up. In one NGO that had its own VCT provision, six out of a total of 31 staff members went for testing. The organization had also offered to pay for testing elsewhere if staff did not want to be tested in their own clinic, but nobody had opted for this. In another NGO, three out of the 59 staff members were tested.

Scaling up
The lessons learned as well as the follow-up were discussed in October 2005. The joint project now enters Phase 2 and the project will be scaled up to other NGO partners in Ethiopia, with the assistance of an NGO whose core business is organizational capacity building. More clarity on funding internal mainstreaming processes is expected to come from the donor guidelines that are currently being formulated.

Despite the fact that toolkits on internal mainstreaming are available, the Ethiopian NGOs expressed the need to learn through practical experiences. However, few experiences have been officially documented. The experiences in Ethiopia have therefore been documented and published on 1 December 2005 (World AIDS Day) to promote linkages and learning, especially among national/indigenous NGOs.1

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1. For more information on this model, the project and its follow-up, please e-mail: aids.kic@novib.nl