

# **Global Campaign for Microbicides Annual Report**



**Global Campaign  
FOR Microbicides**

**March 2001 to March 2002**

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## Summary:

Over the past year, the Global Campaign for Microbicides has significantly broadened and deepened our work to accelerate widespread access to microbicides and the female condom. Our coalition of partners has expanded to over 100 organizations worldwide and we now have affiliated campaign sites in 10 Northern American cities and a new secretariat for European operations based in London. For the second year in a row, our legislative advocacy has secured a \$15 million earmark for microbicide research at the US Agency for International Development (USAID) as well as substantial increases in funding for microbicide research and development (R&D) at the National Institutes of Health (NIH) and the Centers for Disease Control (CDC). We have sponsored over 55 workshops, presentations and exhibit booths at conferences in the United States, Trinidad, Argentina, South Africa, Uganda, Canada, Burkina Faso, Australia, India and the United Kingdom. In addition we sponsored a four-day, international advocates meeting for 60 advocates from 28 countries.

All told, our advocacy effort can take credit for ***mobilizing at least \$40 million in new funding over the last two years.*** This represents the single largest injection of funds into the field to date – more than the contributions of the Rockefeller Foundation, the Bill and Melinda Gates Foundation or the UK Department of Funding for International Development (Dfid).

## Introduction

**The Global Campaign for Microbicides** is a broad-based, international effort designed to build support among policymakers, opinion leaders, and the general public for increased investment into microbicides and other user controlled prevention methods. Through advocacy, policy analysis, and social science research, the Campaign works to accelerate product development, facilitate widespread access and use, and protect the needs and interests of users, especially women.

Specifically, the goals of the Campaign are to:

1. Mobilize resources and political will for increased investment in microbicide research and greater access to the female condom and other cervical barrier methods;
2. Create a supportive policy environment for the timely development, introduction and use of new prevention technologies; and
3. Ensure that as science proceeds, the public interest is protected and the rights and interests of trial participants, users, and communities are fully represented and respected.

The Global Campaign pursues its work through a small core staff and by funding partner organizations to pursue activities that directly advance the Campaign goals and objectives. In April 2001 the Campaign moved its secretariat to PATH (Program for Appropriate Technology in Health), a global health organization that specializes in improving the health of women and children.

This report summarizes the work and achievements of the Global Campaign over the past 12 months from March 2001 to March 2002.

## Raising Awareness and Political Will

The key to our strategy for raising resources and political will is to mobilize the public and other non-governmental organizations (NGOs) in support of the microbicide cause. Rather than try to build a movement from scratch, our strategy has been to enlist the support of various “natural allies” – groups that should be supportive of the Campaigns goals by virtue of their interest in women’s health, family planning, human rights, and/or HIV/AIDS. We have especially sought the support of national groups that can lend access to their grassroots constituencies as well as assistance at a national or regional level with policy or legislative work.

The Campaign uses a variety of means to reach out to potential ally groups including one-on-one meetings, briefings, workshops and presentations at key conferences, and invitations to become a formal “co-sponsor” of the Campaign. Co-sponsors agree to promote the Campaign goals and objectives among their constituencies through a range of activities, including printing articles in their newsletters, circulating the Campaign petition, putting information on their web sites, and sponsoring educational events. The Campaign now has over 100 co-sponsoring organizations worldwide.

Especially significant this year has been the recruitment of AIDS Action as a key Campaign partner group. AIDS Action, a DC-based NGO, strives to be “the national voice” on HIV/AIDS and convenes National Organization Responding to AIDS (NORA), a coalition of over 175 US organizations that work domestically on AIDS issues. The addition of groups like AIDS Action, San Francisco AIDS Foundation, and the Gay Men’s Health Crisis as co-sponsors has significantly strengthened the Campaign’s presence and legitimacy in the mainstream HIV/AIDS world.

### *Local Sites*

In addition to co-sponsorship, the Campaign now has 10 local Campaign sites in North America that promote the goals of the Campaign in their local and state

### **Box 1: Local Campaign Sites**

**California** - MAS (Microbicides as an Alternative Solution) – Northern California

- California Family Health Council & Pacific Institute for Women's Health – Southern California

**Connecticut** - Greater Hartford HIV Action Initiative

**Georgia** - AIDS Survival Project and Planned Parenthood of Greater Georgia

**Illinois** - AIDS Foundation of Chicago

**Iowa** - AIDS Project of Central Iowa

**New York** - Harm Reduction Coalition and Planned Parenthood New York City

**Pennsylvania** - Family Planning Council and Health Federation of Philadelphia

**Washington** - Planned Parenthood of Western Washington

**Canada** - Canadian AIDS Society

environments. These sites have been cultivated over the past two years through the outreach of Anna Forbes, the Campaign's Field Organizer. Each site is hosted by one or more existing organization that sponsors workshops, organizes outreach and lobbying events, and convenes a local Global Campaign coalition.

Five of the sites have received sub-grants from the Campaign to pursue local activities, including a campus outreach project in Connecticut, the convening of a statewide microbicide coalition in California, the development and training of a speakers bureau in New York, a Midwest organizing project in Illinois, and outreach and education activities in Pennsylvania. The selection of the sites is carefully coordinated to support our overall legislative strategy (see below). Our goal is to encourage informed and vocal constituencies in the districts of Congress people key to our appropriations strategy.

In addition, the presence of these local outposts has meant that the Campaign is better able to ensure a presence for our issue at the key AIDS, STD and reproductive health conferences in the US and Canada. We have seen a distinct growth in the number of workshops and panels presented on microbicides and the female condom by our partner groups, in addition to those that we organize centrally. We are pleased with the emerging sense of collective ownership of the Campaign and feel that our strategy of catalyzing local affiliates has been highly productive.

*Box 2 on the following page presents a subset of some activities undertaken by our local affiliates this past year.*

### ***The Emergence of CAMI***

In addition to our US sites, we saw the emergence of our first statewide microbicide coalition – the California Microbicides Initiative (CAMI). CAMI grew out of the work of our local Campaign sites in northern and southern California. With a grant from the Global Campaign, our northern California partner began convening a statewide coalition of groups interested in pursuing microbicide research and advocacy. Out of this effort came a decision to host a major summit on microbicides for high level policymakers and opinion leaders in California. The resulting event, the “New Millennium Microbicides Symposium,” was geared toward leaders from California’s public health, AIDS, and women’s communities. Held at the Golden Gate Club in San Francisco’s Presidio, over 150 state leaders attended. The program was moderated by Kate Kelley, a San Francisco news anchor.

In addition to catalyzing interest in the policy community and among the media, the event helped consolidate support for microbicides among the six groups that served on the organizing committee: Planned Parenthood Golden Gate, UCSF AIDS Research Institute, the San Francisco AIDS Foundation, and the Center for Women and Gender at Stanford University. Representatives from these groups met regularly over eight months to learn about microbicides and plan the event. Prior to their role on the organizing committee, none of these influential groups was active in microbicide advocacy.

*See <http://www.sfaf.org/symposium/> for a description of the symposium.*

## Box 2: Examples of Activities of Local Campaign Sites

Our **Illinois** site coordinator presented a microbicides workshop at the AIDS Foundation of Chicago's annual statewide Skills-Building Conference on September 20, 2001. In addition, they made a number of presentations to diverse audiences, including:

- the HIV Coordinated Planning Council
- Chicago Women's AIDS Project
- the HIV Prevention Planning Group
- Families and Children's AIDS Network
- Southside HIV/AIDS Resource Providers
- SafeStart
- East St. Louis AIDS Advocacy Committee

The **IL** site hosts a web page [[www.aidschicago.org/prevention/microbicide\\_campaign.htm](http://www.aidschicago.org/prevention/microbicide_campaign.htm).] on the AIDS Foundation of Chicago's web site to promote its "Beyond Condoms Campaign".

The **Northern California** site co-hosted the *New Millennium Symposium* organized by the Global Campaign and held in San Francisco on October 16, 2001 -- an event that resulted in substantial public education and media attention. Its members are also working on a brochure for adolescents about STD and HIV prevention that will feature a discussion of microbicides.

**Connecticut** Site coordinator, Laurie Sylla, co-presented a well-attended workshop at the American Foundation for AIDS Research's National AIDS Update Conference in San Francisco. Her site also presented a workshop on rectal microbicides at the New England Gay Men's Health Summit and training on microbicides for 50 HIV test counselors from across the state.

**New York** site coordinator, Mara Kennedy, made a presentation at a "Best Practices Meeting" held by Planned Parenthood New York City on December 7, 2001. She also co-presented with Anna Forbes at the Women's HIV Collaborative (September 25, 2001) and at SMART University (October 5, 2001) in New York City.

**Pennsylvania** has developed a low-literacy brochure on the need for microbicides and microbicide advocacy. Now in final preparation, this piece will be distributed in family planning clinics, HIV/AIDS primary care clinics and other sites in conjunction with 15,000 sign-on postcards to Senator Specter urging his support of the Microbicides Development Act (S. 1752).

**Pennsylvania** site member organization, the SafeGuards Gay Men's Health Project, also maintains a web site designed to provide microbicide information specifically to gay and bisexual men ([www.lifelube.org](http://www.lifelube.org)).

A member of our **Canadian** site co-presented an "affinity group" discussion and workshop at North American AIDS Treatment Action Forum in Vancouver, British Columbia on December 3, 2001.

### ***International Outreach***

In addition to outreach in North America, the Global Campaign continued to work with partner groups to ensure that the microbicide issue was represented at key international venues.

In April 2001, Megan Gottemoeller worked with steering committee member Salimata Niang of Society of Women and AIDS in Africa (SWAA) International, to present a satellite session on microbicides at the bi-annual SWAA conference in Kampala, Uganda. The session, which was presented both in English and French, attracted over 80 participants from SWAA chapters throughout Africa. This was an important event for both raising awareness and interest in the Global Campaign among this Africa-wide network, and for introducing new public faces into the microbicides discourse.

In September 2001, the Campaign sponsored a satellite session at the Global Strategies for Prevention of Mother-to-Child Transmission conference (MCTC) held in Uganda. This conference gave the Campaign an opportunity to reach an entirely new audience with information about woman-controlled prevention. We developed an MCTC-specific brochure and distributed buttons that proclaimed: “Protect the Mother, Protect the Child. Support Microbicides and the Female Condom.”

In October 2001, the Campaign worked with three co-sponsoring organizations--the Indian Network of NGOs Working on HIV/AIDS, the Female Health Foundation, and Health and Development Networks--to organize an advocacy skills-building workshop at the Sixth International Congress on AIDS in Asia and the Pacific in Melbourne, Australia.

Also in October, the Campaign gave a small grant to International Community of Women living with HIV/AIDS (ICW) to conduct a workshop on prevention options for women at the Global Network of People with HIV/AIDS meeting in Trinidad. Fundación para la Educación e Investigación sobre la Mujer (FEIM) received another such grant to support an exhibit booth, workshop, and awareness survey at the V National Conference on HIV/AIDS in Argentina in November. The ICW workshop was part of an ongoing interest in and collaboration with ICW on the topic of microbicides for positive women, while the FEIM booth introduced the topic to a new audience. Both activities were significant in that they were planned, coordinated, and conducted primarily by partner organizations, with the Global Campaign providing only informational material and financial support.



Journalists, Pauline Ngunjiri and Princess Olufemi-Kayode, are brainstorming media strategies for microbicides after MCTC.

These events were followed in December by a workshop and evening reception sponsored by the Global Campaign at the 12<sup>th</sup> International Conference on AIDS and STDs in Africa (ICASA), held in Ouagadougou, Burkina Faso. When introduced to the concept of microbicides, most conference-goers were overwhelmingly supportive and could not understand why such a product did not exist yet. “In Africa, women are dying now,” one delegate exclaimed, “We needed this product yesterday!” While in Ouagadougou, Ananthi Thambinayagam also presented on behalf of the Campaign at the African Regional Forum of Religious Health Organizations in Reproductive Health.

## Legislative Advocacy

A second thrust of the Global Campaign’s work this year has been working with Congress to increase the Federal investment in microbicide R&D and to improve the effectiveness of current government efforts. For the past three years, the Global Campaign has been pursuing a three-part legislative strategy:

1. Seeking to increase appropriations for microbicide R&D via the National Institutes of Health (NIH), US Agency for International Development (USAID), and the Centers for Disease Control and Prevention (CDC);
2. Introducing legislation to establish a "microbicide research and development program" at NIH and to strengthen ongoing microbicide activity at CDC; and
3. Using conference language and other Congressional directives to encourage greater coordination of Federal research efforts and more transparent reporting of monies invested.

In both Fiscal Year (FY) 2001 and FY 2002 we were able to get substantial increases in funding for microbicide research via the USAID (\$12 million in FY01 and \$15 million in FY02), up from less than \$2.3 million in prior years.

Through Congressional pressure and meeting with top NIH and CDC officials, we were also able to secure increases in the commitments of these agencies. Dr. Anthony Fauci, the Director of the National Institute of Allergy and Infectious Disease (NIAID), has always been ambivalent toward microbicide research, so much of our energy has gone towards encouraging greater engagement on his part. Over the past four years, investment in microbicide-related research at NIH increased from \$19.7 million in FY 1998 to \$47.8 million in FY 2002, due largely to pressure from the Global Campaign and concerned advocates. Although this is a major achievement for our movement, funding for microbicide research still accounts for only 2 percent of all AIDS-related research at the NIH.

All told, our advocacy effort can take credit for ***mobilizing at least \$40 million in new funding for microbicide research over the last two years.*** This represents the single largest injection of funds to date – more than the contributions of the Bill and Melinda Gates Foundation, the

Rockefeller Foundation, amFAR or the UK Department of International Funding for Development (Dfid).

More recently there has been a positive shift of attention to microbicides at CDC. We recently received a “thank you” call from CDC staff saying that the results of our advocacy with CDC management were paying off. “The money is now flowing for microbicides thanks to you,” one staffer said. “Keep up the pressure.”

Also during this session, the Campaign worked with allies in the House and the Senate to introduce the **Microbicides Development Act of 2002**. HR 2405, the House version of the bill, was introduced by Reps. Connie Morella (Rep.-MD) and Nancy Pelosi (Dem-CA) in June and currently has more than 40 bipartisan cosponsors. Senators Jon Corzine (Dem-NJ) and Olympia Snowe (Rep-MA) introduced the Senate version (S 1752) last November. Original and current co-sponsors now include Senators Leahy, Cantwell, Murray, Dodd, Kerry, Inouye, and Feinstein. The bill would mandate a fully-fledged program of research on microbicides at NIH and expanded work at CDC.

Campaign affiliates and partner groups worked mightily to recruit original co-sponsors for the bill and get additional members to sign on. It was during this effort that it became clear that our strategy for developing “the myth of the marching millions” was truly working. We were able to generate hundreds of phone calls, emails and letters to Congress through our local Campaign sites and their networks. The Director of Health Equity at the Rockefeller Foundation noted that during this period, a colleague of his on the Hill exclaimed, “Who are these microbicide people. They’re everywhere!”

## Policy Advocacy

Among the Campaign’s goals over the past year has been to make microbicides central to HIV/AIDS policy and to begin to address the concerns that policymakers may have that could thwart timely access to new prevention technologies.

### *Mathematical models*

As part of this effort, we commissioned the London School of Hygiene and Tropical Medicine to develop a series of mathematical models that can project the potential impact of introducing a microbicide into different sexual networks and settings. Dr. Charlotte Watts and her team adapted three existing computer models – one modeling sex workers and their clients, one modeling sexually active youth, and one modeling intravenous drug users and their partners—to create user-friendly computer programs where policymakers can input data from their local environment and see the impact that a microbicide of different efficacies would have on the growth of the epidemic. In addition, with funding from the Campaign, Dr. Watt’s team developed an entirely new model to project the impact of microbicides among married couples and other “regular partnerships.”

These models have already had substantial impact in a number of policy forums. They have played a role in galvanizing more support for microbicide research at the CDC, and CDC cites

our findings as central to their justification for microbicide work in their microbicide strategic plan.

Likewise, at a recent World Health Organization (WHO)-sponsored meeting on regulatory issues related to microbicides, the group formally recommended that the Campaign/London School models be made available to developing country drug regulatory authorities to help them make informed decisions regarding the licensing of proposed microbicidal products.

The models also formed the basis of further analysis, commissioned by the Rockefeller Foundation, to estimate the potential public health impact of introducing microbicides more broadly. *This study showed that a 60% efficacious microbicide introduced in 73 of the poorest countries could avert 2.5 million HIV infections over three years<sup>1</sup>*



Lori Heise explains the findings of the Rockefeller Foundation Microbicides Initiative at the National Press Club.

In addition we have used these models to examine the issue of “migration” away from the condom – the concern that because microbicides will be easier to use than condoms, women will default to this “less efficacious” method. The model shows that under most circumstances, concerns about “migration” are ill founded because the benefits that accrue from consistent microbicide use outweigh the negative impacts of shifts in condom use. Lori Heise recently presented these data at the WHO in Geneva where the Director of the Reproductive Health Research Division observed that this analysis could have a major impact on the thinking of the wider field. We have submitted an article entitled, “Shifts in condom use after microbicide introduction: Should we be concerned?” for publication in the American Journal of Public Health.

### ***Influencing UN discourse***

The Campaign has also worked to ensure that microbicides are central to UN discourse on HIV/AIDS. In May, we sent a letter to UN Secretary-General Kofi Annan, asking him to use his influence to highlight the need for greater investment in microbicides and expanded access to the female condom. Kofi Annan has indeed begun to use his bully pulpit to advocate for microbicides, a development largely due to the Campaign’s letter and strategic interventions by partner organizations, the International Women’s Health Coalition and the Global Health

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<sup>1</sup> The above estimate assumes that 20% of individuals who can easily be reached through existing services use a microbicide in 50% of sex acts in which a condom is not used.

Council. CNN recently aired a 10-minute segment on microbicide research that featured Kofi Annan advocating greater global attention to this issue.

The Global Campaign was also highly involved in civil society activities aimed at informing and influencing the United National General Assembly Special Session on HIV/AIDS, known as UNGASS. UNGASS was a watershed event for global AIDS, with the signing of a Declaration of Commitment and the launching of a Global Fund for AIDS, TB and Malaria, calling for countries to dedicate billions of dollars to fighting these epidemics. Through our participation in the International Issues Working Group of NORA, the Global Campaign was able to raise the issue of gender sensitivity in HIV/AIDS policy and the need for expanding access to and research on prevention options for women. We also helped support the participation of several international representatives to UNGASS by covering travel costs and helping five colleagues from Africa and India get NGO accreditation.

Significantly, during a briefing sponsored by the Population Council, the UK Mission, and the Rockefeller Foundation, members of the Global Campaign were acknowledged from the podium and asked to stand to recognize their role in putting microbicides onto the international agenda. Dr. Lincoln Chen of the Rockefeller Foundation acknowledged publicly that when advocates first raised the issue of microbicides, he did not listen. “I stand corrected,” he noted. “The Rockefeller Foundation is now supporting a major initiative in this area.”

## Representing User Needs and Interests

A core goal of the Campaign is to ensure that the needs and interests of users—especially women—are represented and respected in all phases of microbicide development. Frequently, without our insistence, there would be no “user” or civil society representation at the key venues discussing microbicide science and policy.

### *Scientific venues*

Campaign staff and colleagues have offered vital input from a woman’s health perspective in the following forums:

- ✓ A consensus conference convened by WHO to establish guidance on using Nonoxynol-9 for HIV and STD prevention;



The Campaign’s advocacy poster at the Alliance for Microbicides’ meeting on science, research and clinical trials.

- ✓ A scientific conference sponsored by NIH to develop a research agenda for rectal microbicides;
- ✓ A consultation convened by the Bill and Melinda Gates Foundation to examine ethical implications of testing a microbicide “pill” in Cameroon;
- ✓ A meeting sponsored by the Office of AIDS research at NIH to develop their strategic plan for microbicide development;
- ✓ A meeting sponsored by the WHO to agree on the scientific basis for regulatory decisions regarding microbicides; and
- ✓ The on-going work of the microbicide protocol development team of the HIV Prevention Trials Network (HPTN) [the NIH-sponsored clinical trial network].

### ***The Rockefeller Foundation Microbicide Initiative***

Perhaps our greatest contribution in terms of user perspectives came through our participation in the Rockefeller Foundation’s Microbicide Initiative. In July 2000, the Rockefeller Foundation convened a group of scientists, economists and policymakers to explore ways to catalyze a “step change” in the microbicide field, including exploring the possibility of creating a new organizational entity. The Foundation also supported five working groups to develop a scientific blueprint, a pharmaco-economics study, an advocacy and access plan, and an evaluation of gaps and opportunities to accelerate product development.

The Campaign’s presence as part of this process helped ensure that the historical role of advocates in advancing this issue was not lost, and that any new structure would have adequate representation from civil society, including users and developing country participants. Due largely to the Campaign’s intervention and the work of allies, we were able to ensure that access and use were central features of the Rockefeller initiative (before it focused simply on getting a product – not ensuring that women actually had access to it and the ability to use it properly).

Lori Heise served as the co-chair of the advocacy working group of the Rockefeller Initiative and authored, “Global Advocacy for Microbicides: A Call to Action.” This paper represents the outcome of a consultation with 28 international advocates, convened by the Global Campaign in August 2001, to develop a global advocacy plan for the field. The Global Campaign commissioned a mapping of global advocacy actors, planned the meeting, and translated the group’s findings into a formal document.

Lori Heise also served on the Access and Use working group as well as gave major input to the public health report. Overall, the Campaign participated in seven separate meetings convened by the Rockefeller initiative.

## Strategic Communications, Networking and Message Development

The Global Campaign has worked diligently this year to improve our ability to serve as an information touchstone for microbicide advocates. We now have a number of mutually reinforcing mechanisms in place to keep people informed and to encourage individuals to stay “on message.”

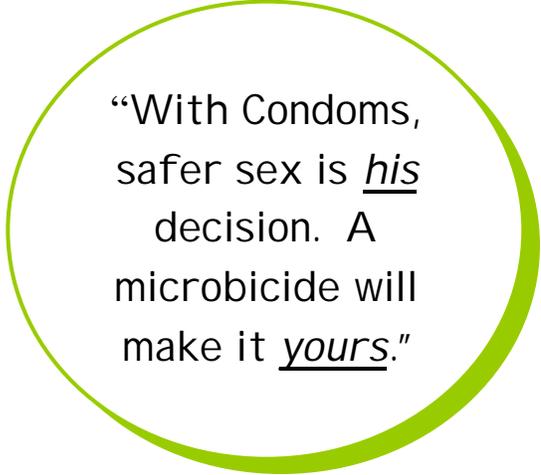
Every two weeks we distribute a copy of our email newsletter, “GC News,” to almost 600 advocates worldwide. As the GC News trailer says, “The *Global Campaign News* is a forum for international exchange on microbicide activities and information with an aim to build a more informed and integrated movement for microbicide development and other prevention options against HIV and STDs.”

In addition, twice yearly we publish a formal newsletter that we distribute at conferences, to donors, and to our full database of over 800 microbicide allies.

We are presently in the process of re-designing our existing web page to make it even more useful for advocates. Currently, individuals can download our fact sheets, read key articles and sign the petition on line. The new web page will add additional features, including the ability to send a message to your legislator, communicate through colleagues via a bulletin board, and post dispatches from the field. We plan to launch this new, improved web page at the Microbicides 2002 conference scheduled for May 12-15<sup>th</sup> in Antwerp, Belgium.

Even more important has been the Campaign’s role in helping to establish and promote the key advocacy messages to the wider microbicide community.

Over the last seven months, the Campaign has worked with Geoffrey Knox and Associates to develop a strategic communications plan to guide our interactions with different constituencies. Knox and his colleagues conducted extensive interviews and developed a “message menu” for Campaign partners to use when interacting with policy makers or the media. In a recent cover story of the Baltimore City Paper, it was heartening to see the positive impact of this effort. Virtually all the individuals interviewed in this full-length feature echoed messages from the Campaign’s message menu.

A quote is enclosed in a thick green circular border. The text inside the circle reads: “With Condoms, safer sex is his decision. A microbicide will make it yours.”

“With Condoms,  
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Our role in message development has been especially important with respect to interpreting and explaining the main policy findings of the Rockefeller Microbicide Initiative. Global Campaign staff took the lead in shaping the main messages from the five working groups and in helping the media consultants incorporate them into outreach materials. We also co-sponsored, together with the International Center for Research on Women and the Alliance for Microbicide Development, a major press event at the National Press Club to launch the papers, including the

Global Advocacy Plan and the public health analysis that drew on the Campaign's modeling work. Lori Heise was the primary speaker at the briefing. The Kaiser Foundation simulcast the event on the web and a tape is available for viewing at

[http://kaisernetwork.org/health\\_cast/hcast\\_index.cfm?display=detail&hc=459](http://kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=459)

Finally, in October, we began hosting bi-monthly Campaign meetings for coalition members in the Washington D.C. area. These meetings provide a convenient way for groups to stay abreast of developments and for new actors to become involved in the Campaign.

## Capacity building among Civil Society Actors

One of the five primary recommendations from *Advocacy for Microbicides: A Call to Action*, stated:

“Over the next two years, priority should be given to building the capacity of NGOs and their networks to advocate for microbicides and to participate actively in decision-making around research agendas and clinical trial implementation.”

At the Global Campaign we take this mandate seriously. After spending years demanding that civil society actors have a “place at the table,” we are now working hard to ensure that women's health advocates and other NGO colleagues have the skills and information they need to be effective there.

In June 2001, the Global Campaign brought together 60 advocates from 28 countries to build skills, share strategies and plan for future events. This four-day International Advocates' Meeting was timed to coincide with UNGASS on HIV/AIDS to facilitate the Campaign's presence there. Feedback on the event was universally positive. As one delegate from Chile noted in her evaluation:

“I have been to four international advocates meetings in the past three years and this one was the most motivating and ACTION oriented by far! The others were excellent for sharing information and experiences, but this meeting is leading to some real concrete results and advancement beyond shared knowledge.”

The Global Campaign has also developed materials and tools specifically designed to meet the needs of grassroots advocates, including:

- ✓ a standard PowerPoint Presentation consisting of slides and script that can be adapted as needed to suit local audiences;
- ✓ new Action Kit materials that can be localized and reproduced as presentation handouts;
- ✓ "How To" fact sheets and instructional materials that guide less experienced organizers on how to undertake various Campaign activities; and

- ✓ organizational templates and Activities Mapping Grid to help give advocates a convenient, neutral starting point for discussing how they can best collaborate with local partners and identify activities.

## Management Achievements

Over the past year, the Global Campaign successfully transferred its base of operations from the Center for Health and Gender Equity (CHANGE), to the Program for Appropriate Technology in Health (PATH), a international NGO dedicated to improving the health of women and children. As the Campaign has grown in size and influence, it began to overwhelm the agenda and organizational capacity of CHANGE, its original home. In May of 2000, the steering committee recommended that the Campaign recruit a full-time director and that it consider either spinning off as a separate organization or shifting to a larger organization. In July, Lori Heise stepped down as co-director of CHANGE to assume the directorship of the Global Campaign and in April, the secretariat formally transferred to PATH.

Since joining PATH, our team has had to master an extensive array of new procedures and contract mechanisms. And they have done so with aplomb. Over the last year, the Campaign has issued six subgrants to partner groups, negotiated six subagreements, and retained five consultants.

We have also made substantial progress toward consolidating a visual identity for the campaign. After an arduous process of consultation, we now have a new logo that groups are encouraged to use to create a common umbrella identity for Campaign partners. The new logo is incorporated into the revised web site, our new stationery and business cards.

## Publishing and Media Outreach

Interviews with Global Campaign staff and key volunteers have also appeared frequently in print and electronic media over the last year, including coverage in the *LA Times*, the *Chicago Tribune*, the *New York Times*, *The Wall Street Journal*, *The Economist*, *The Times of India*, the *Hartford Courant*, the *Blue Sheet*, the *Ottawa Citizen*, the *Baltimore City Paper*, *St. Petersburg Times* and *Vogue Magazine*. Internet interviews with Global Campaign personnel have also been posted on major internet news sources including HIV Insite ([hivinsite.ucsf.org](http://hivinsite.ucsf.org)), BETA ([beta.org](http://beta.org)), Journalists Against AIDs-Nigeria ([nigeria-aids.org](http://nigeria-aids.org)), GayHealth.com, The Body ([thebody.com](http://thebody.com)), SeaAIDS, and GenderAIDS.

In addition, members of the Campaign continue to publish widely in the specialized press, including:

- Forbes, A. Moving Beyond Simple Latex. **HIV Plus** (a magazine with circulation of 118,000), June/July 2002.
- Forbes, A. Beyond Latex: Microbicides. **Issues** (a publication of the Terrence Higgins Trust Gay Men's Health Promotion Initiative, London). No. 19.
- Forbes, A. Microbicides on the Horizon. **ACRIA Update, Vol. 10, No. 3.**
- Gottemoeller, M. Microbicides: Expanding the Options for STD Prevention. **SEICUS Report**. Volume 30(1).
- Hoffer, KM & Robles, G. Microbicides: Prevention Tool of the Future. **Positively Aware**. Jan/Feb 2002.
- Slater, J. Microbicides: the new frontier in STI prevention. **The SexEducator**. Planned Parenthood of Toronto. Volume 1(2).
- Sylla, LB. Microbicides: Worthy of More Attention. **Center for Interdisciplinary Research on AIDS**. Volume 3(2).
- Microbidas. **ABRACO** (Um Boletim para Pessoas Infectadas e Afectadas pelo VIH/SIDA) Nov/Dec 2001
- Microbicides: une recherche difficile mais prometteuse. **Equilibres & Populations**, Nov/Dec 2001
- Preservatif féminin: Roselyne Bachelot interpelle le gouvernement. **Equilibres & Populations**, June/July 2001.
- Prioridad en microbidas y opciones preventivas para mujeres. **Revista Mujer Salud** (Red de Salud de las Mujeres Latinoamericanas y del Caribe), Mar 2001
- Topical Microbicides: A Viable HIV-Prevention Alternative. **Canadian Woman Studies/Les cahiers de la femme**. Volume 21(2).

## New European Secretariat

We are pleased to announce that as of March 2002, the Global Campaign has an official secretariat in Europe, housed at International Family Health (IFH). IFH is a London-based NGO that works on sexual and reproductive health issues internationally. IFH was recently awarded a three-year grant from the European Commission to pursue microbicide advocacy in Europe, Africa and Asia. IFH has agreed to pursue its work under the banner of the Global Campaign and to serve as our secretariat for organizing in Europe. We are working closely together to program our funds so as to maximize impact. The Global Campaign is also lending a staff member to IFH for two months this summer to serve as an on-site liaison and to provide technical assistance as the European initiative is launched.

On February 20, 2002, we jointly organized a daylong meeting to plot strategy for mobilizing resources and political will in Europe. Twenty-five individuals from key European NGO groups attended. This event will be followed up by a training session for advocates, scheduled for May 12, 2002 in Antwerp Belgium.

## Looking to the Future

Over the next year we plan to significantly increase our efforts to operationalize the third plank of the Global Campaign agenda: namely, working to ensure that as science proceeds, the needs and interests of users, trial participants and communities are adequately represented and respected. To do so, we plan to launch a new initiative to prepare communities to engage productively in the clinical trial process.

We also hope to support a new locus of organizing in Uganda, Kenya and Tanzania (key countries involved in upcoming trials) through the funding of an East African secretariat.

## References

### *Global Campaign Staff and Partners*

Lori Heise, Director  
Megan Gottemoeller, International Programs Coordinator  
Anna Forbes, Field Organizer  
Pam Norick, Legislative Advisor  
Ananthu Thambinayagam, Program Associate  
Imogen Fua, Program Assistant  
Geoffrey Knox and Associates, New York  
Health and Development Networks, South Africa/global

### *Steering Committee*

Deborah Arrindell, American Social Health Association, USA  
Dazon Dixon Diallo, Sisterlove, USA  
Geeta Gupta, International Center for Research on Women, USA  
Christopher Elias, Program for Appropriate Technology in Health, USA/global  
Salimata Niang, Society for Women and AIDS in Africa, Senegal  
Gita Ramjee, Medical Research Council, South Africa  
Cory Richards, The Alan Guttmacher Institute, USA  
Zeda Rosenberg, Family Health International, USA/global  
Shira Saperstein, Moriah Fund, USA  
Martine de Schutter, Netherlands Foundation for STD Control, Netherlands  
Laurie Sylla, Greater Hartford HIV/AIDS Action Initiative, USA  
Gaye Tharawan, Population Council, Thailand  
Balwant Singh, International Family Health, United Kingdom

## *Co-sponsors*

ABIA, Brazil  
ActionAIDS, USA  
AIDS Action, USA  
AIDS Foundation of Chicago, USA  
Akina Mama wa Afrika, UK  
The Alan Guttmacher Institute, USA  
Alliance for Microbicide Development, USA  
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Black Coalition for AIDS Prevention, Canada  
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California Family Health Council, Inc, USA  
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Canadian HIV/AIDS Legal Network, Canada  
Canadian Treatment Action Council, Canada  
CARES, Nigeria  
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Gujarat AIDS Project, India  
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Hesperian Foundation, USA  
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International Center for Research on Women, USA  
International Community of Women Living with HIV/AIDS, global  
International Community Service Centre Trust, India

International Family Health, UK  
International Women's Health Coalition, USA  
Ipas, global  
Journalists Against AIDS, Nigeria  
Kagera Group for Development, Tanzania  
Kriti, India  
LACCASO, Latin America and Caribbean Council of AIDS Service Organizations, Latin America  
Latin American and Caribbean Women's Health Network, Chile  
Medical Research Council, South Africa  
M.E.N.T.O.R.S., USA  
Microbicides as an Alternative Solution, USA  
Milenio Feminista Regional Centro, Mexico  
Ministry of Health, Iran  
Musasa Project, Zimbabwe  
National AIDS Research Institute, India  
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National Black Women's Health Project, USA  
National Family Planning and Reproductive Health Association, USA  
National Women's Health Network, USA  
Naz Foundation, India  
Nazereth Esmael Clinic, Ethiopia  
PANDA Community Advisory Board, USA  
Pacific Institute for Women's Health, USA  
PATH (Program for Appropriate Technology in Health), global  
Planned Parenthood Association of Ghana  
Planned Parenthood Association of South Africa  
Planned Parenthood Federation of America, USA  
Planned Parenthood of Georgia, USA  
Planned Parenthood of Greater Iowa, USA  
Planned Parenthood of New York City, USA  
Planned Parenthood of Western Washington, USA  
Population Action International, USA  
Projet RETRO-CI, Cote d'Ivoire  
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Reproductive Health Technologies Project, USA  
RESOLVE- The National Infertility Association, USA  
Resource Center of Dallas, USA  
Rockefeller Foundation, global  
San Francisco AIDS Foundation, USA  
Seattle Treatment Education Project (STEP), USA  
Sexuality Information and Education Council of the United States (SIECUS), USA  
Simone de Beauvoir Leadership Institute, Mexico  
Sisterhood Mobilized for AIDS/HIV Research and Treatment (SMART), USA

SisterLove, USA  
Sisters Together and Reaching, USA  
Society for Women and AIDS in Africa (SWAA), Africa  
SWAA Ghana  
SWAA Kenya  
Taller Salud, Puerto Rico  
The Centre, Zimbabwe  
Treatment Action Campaign, South Africa  
TRUE Voluntary Organisation, India  
TSN- Sex Positive Resource Center, USA  
UNAIDS, global  
Women and AIDS Support Network, Zimbabwe  
Women's Clinic and Family Counseling Center, USA  
Women's Health Project, South Africa  
Women's Policy, Inc., USA  
Young Women's Movement, South Africa