



AFRICA CHRISTIAN HEALTH
ASSOCIATION PLATFORM

Biennial Report 2017 – 2018



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Nairobi, Kenya
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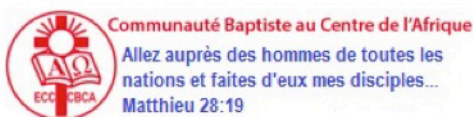
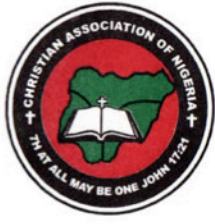


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Foreword

As we reflect on 2018 and all the achievements, changes and challenges encountered, ACHAP is grateful to God for such a dedicated community of Christian Health Workers and reliable partners that worked together with us towards health and healing for all in Africa.

Consistent with our core mandate, the ACHAP Secretariat facilitated a series of capacity development programs for its constituent members, and coordinated various advocacy interventions at national and international forums. As an organization that believes in and is committed to partnerships, ACHAP worked collaboratively with our development partners, inter-faith religious leaders and local communities towards the UNAIDS 90-90-90 targets. At the global stage, ACHAP maintained visible presence at high level international platforms by making submissions at the International AIDS Conference in Amsterdam, PEPFAR Faith Community and HIV Technical Summit, inter-faith prayer breakfast meetings organized by the United Nations General Assembly High Level Meeting on AIDS, among others. Recognizing the need to harness the assets, role and representative voice of Faith-based Health Providers (FBHPs) at national levels, ACHAP embarked upon an ambitious project of supporting the formation of a Christian Health Association in the Democratic Republic of Congo. The year 2018 also saw ACHAP engage in advocacy action championing Anti-microbial Resistance (AMR), as well as Water, Sanitation, and Hygiene (WASH) in healthcare settings. In many ways, 2018 enhanced ACHAP's role, relevance and visibility as a reliable partner for governments, people and partners.

In spite of the afore-mentioned modest achievements, ACHAP is still confronted with dynamic challenges. The leverage, reach and assets of FBHPs remain unrecognized and sub-optimized; partnerships with governments through their ministries of health need to be formalized; we have a limited capacity for documentation, advocacy and negotiations; sustainable funding for FBHPs and ACHAP Secretariat operations remain a challenge. Consequently, the situation continues to affect ACHAP's capacity to support Church-related health associations and organizations to work and advocate for health for all in Africa, towards equity, justice and human dignity.

Yet, given our prospects and potentials, ACHAP is embarking upon a far-reaching transformation process with several objectives: to strengthen our position as the most reliable partner in country health systems; to drive our ability to innovate and to successfully reposition ACHAP as a co-creator of Primary Health Care (PHC) and champion of Universal Health Coverage (UHC). Ultimately, the ACHAP Board aims to evolve operational and structural changes that will promote the development and sustainability of Christian health service delivery in sub-Saharan Africa.

Please, enjoy the 2018 Annual Report, which highlights ACHAP contributions and outlook for the years ahead. We uphold our core values of cooperation, partnerships and unity in diversity. Together, we will reignite PHC and achieve UHC in sub-Saharan Africa!

With gratitude

Signed



Peter Yeboah
Chairman, ACHAP



Nkatha Njeru
Coordinator, ACHAP

Background

The Africa Christian Health Associations Platform (ACHAP) was established in 2007 as an advocacy and networking platform for improving knowledge sharing and joint learning among Christian Health Associations (CHAs) and Church Health Networks (CHNs) in Sub-Saharan Africa. CHA networks have a long history of working within developing countries to provide healthcare services to populations in need, and they form the integral link between the Ministry of Health and the Faith-Based Health Care facilities at the national level. ACHAP provides the framework for a collaborative network with a cohesive voice to advocate for equitable access to quality health care. ACHAP also provides the knowledge and skills for member facilities to deliver better care for their clientele. As of November 2018, ACHAP's membership stood at 44 CHAs in 32 countries in Africa.

Vision

ACHAP aspires towards “Health and healing for all in Africa.”

Mission

Inspired by Christ's healing ministry, ACHAP supports Church-related health associations and organizations to work and advocate for health for all in Africa, towards equity, justice and human dignity.

Core Values

Our work is guided by:

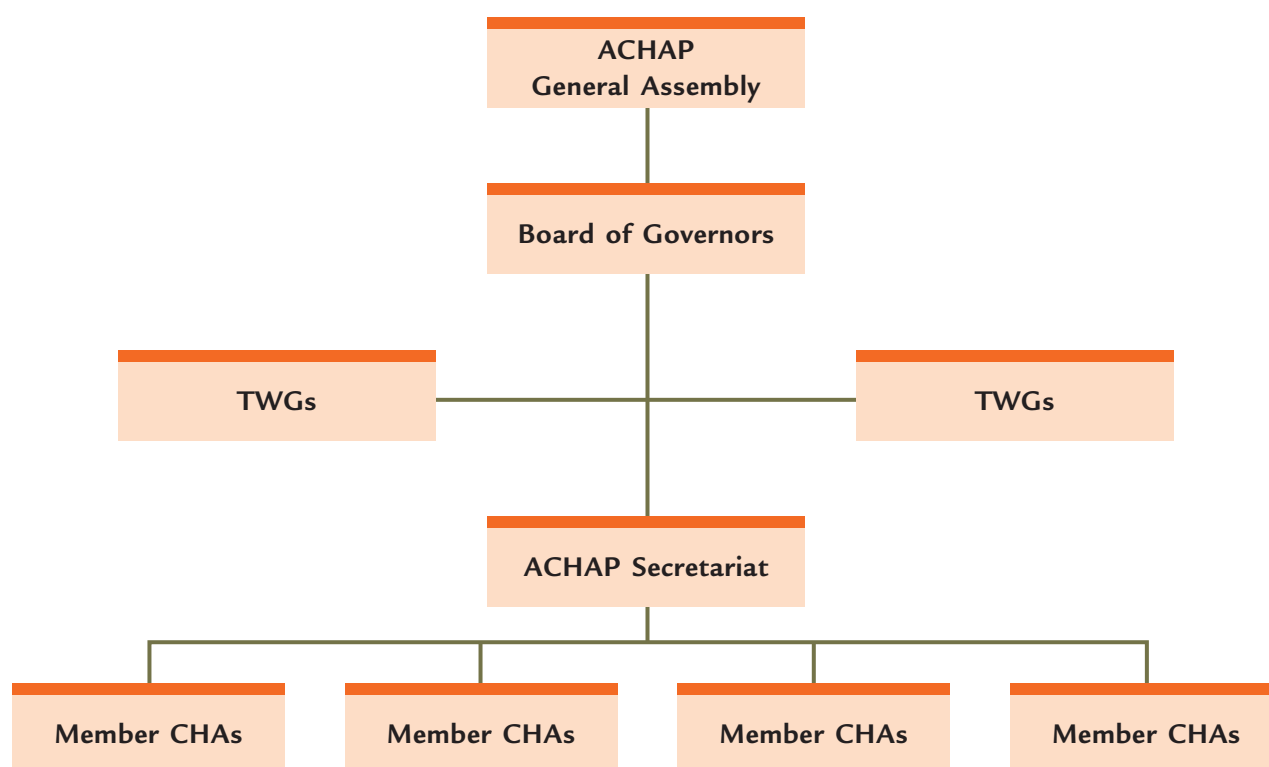
- Equity and justice
- Respect for human dignity
- Gender sensitivity
- Transparency and accountability
- Integrity and good stewardship
- Innovation and resourcefulness
- Inclusive and non-discriminatory
- Compassion and solidarity
- Preference for marginalized and disadvantaged populations.

With the adoption of a new constitution and registration as an international NGO in 2012, ACHAP established formal organization structures to better serve its members.

ACHAP's Key Functions

1. To facilitate **networking and communication** among Christian Health Associations and other Church Health Networks in Africa.
2. To facilitate **joint advocacy** with and for the Christian Health Associations and Church Health Networks in Africa on matters of health development.
3. To support the **capacity development** of Christian Health Associations and Church Health Networks to provide quality health care through Church Health Networks.
4. To establish and maintain **partnerships** with other institutions and organizations in support of health development in Africa

ACHAP Structure



Elected Board Members (February 2017 AGM)

- Peter Yeboah, CHAG (Chair)
- Lebo Mochaie, CHAL (Vice Chair /Southern Africa representative)
- Dr Ndilta Djékadoum, AEST (Member, Central Africa representative)
- Matthew Azoji, CHAN (Member, West Africa representative)
- Pierre Mbeleg, CEPCA (Member, francophone representative)
- Dr Tonny Tumwesigye, UPMB (Member, Eastern Africa representative)
- Samuel Mwenda, CHAK (Member)
- Mwai Makoka, WCC
- Mirfin Mpundu (Member, DSO representative)
- Nkatha Njeru, ACHAP Secretariat Coordinator/Board Secretary

The World Council of Churches (WCC) and Drug Supply Organizations (DSO's) are co-opted as ex-officio members.

Peter Kwame Yeboah

CHAIRMAN



Peter is Executive Director of the Christian Health Association of Ghana (CHAG), the largest private not-for-profit and non-state provider of health services in Ghana. In April 2018, Peter was appointed as a Member of the GAVI CSO Steering Committee.

Peter holds two post-graduate degrees; a joint Master of Science in Health Policy, Planning & Financing from the London School of Economics and the London School of Hygiene & Tropical Medicine, and a Master of Public Health/ ICHD from the Royal Tropical Institute (KIT)-Amsterdam in The Netherlands. Given the aspirational needs of ACHAP, Peter seeks to promote the growth and development of ACHAP towards attaining Universal Health Coverage in sub-Saharan Africa.

His main responsibilities comprise providing strategic leadership, developing partnerships and representing the interest of ACHAP and CHAG at the global and national health sector levels through advocacy, networking, lobbying and policy dialogue. With over two decades of experience in the faith-based and national health systems, Peter's acquired expertise include, but are not restricted to, Health Systems Strengthening/Development, Social Policy, Health Policy Planning & Financing, and Community-Based Primary Health Care.

Lebohang Patricia Mothae

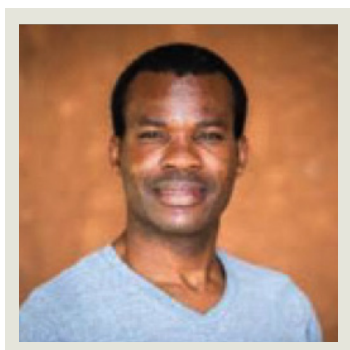
VICE CHAIR AND SOUTHERN AFRICA REPRESENTATIVE



Lebohang Patricia Mothae, who holds a master's degree in Public Management (MPub), is Executive Director of the Christian Health Association of Lesotho (CHAL), a network of church-owned health facilities that account for 40 percent of Lesotho's health care. She has been involved in academia at the University of the Free State in South Africa and Limkokwing University of Technology in Lesotho, where she lectured in the areas of public and municipal administration and management, public policy, public finance management and human resources management for about 7 years. She has also published research in accredited journals as well as contributed a chapter to a book addressing governance and leadership, public policy and public service delivery and local governance and development. She also serves as a member in the National Drug Supply Council, Intercountry Coordinating Committee, overseeing the national Extended Program of Immunization (EPI), Solidarmed Lesotho, National Health Research Ethics Committee, and more.

Dr. Mwai Makoka

BOARD MEMBER AND WCC REPRESENTATIVE



Mwai Makoka, MBBS, is a Program Executive for Health and Healing at the World Council of Churches in Geneva. Dr. Makoka also serves on the boards of the Ecumenical Pharmaceutical Network. He qualified as a Doctor of Medicine in Malawi in 2002 and received further training in public health microbiology and infectious diseases in the United States. Besides clinical practice, Dr. Makoka previously worked in the national HIV programme and in academia and was previously Executive Director of the Christian Health Association of Malawi. In June 2018, he was appointed as a member of the Board of Directors for Christian Connections for International Health (CCIH).

Paul Peter Mbeleg

BOARD MEMBER AND FRANCOPHONE REGION REPRESENTATIVE



Paul Pierre Mbeleg is a Board member of ACHAP and a focal point for the Council of Protestant Churches of Cameroon, a member of ACHAP (CEPCA). He holds an engineering degree in science from Howard University. From 2014 to 2016, Paul Pierre led the Presbyterian Church of Cameroon (EPC) as Director of Human Resources. He also worked as a computer expert at the National Social Insurance of Cameroon and Branch Director of the Social Insurance Fund.

Paul has conducted several studies on the Social Insurance Fund and the development of health insurance policies and has been involved in research aimed at eliminating the economic crisis in social insurance funds in Cameroon. In addition, he worked as a strategic operational plan designer for the National Social Insurance Fund of Cameroon.

Dr. Mirfin Mpundu

BOARD MEMBER AND DSO REPRESENTATIVE



Dr. Mirfin Mpundu is the Executive Director of the Ecumenical Pharmaceutical Network, an international NGO that supports church-run health institutions on pharmaceutical systems strengthening, promoting just and compassionate pharmaceutical services. He is also Head of Action on Antibiotic Resistance (ReAct) Africa, part of a global network dedicated to preventing antibiotic resistance. A clinical pharmacist and public health specialist with 20+ years of experience in public health, pharmaceutical supply chain management, clinical, and regulatory pharmacy practice, Dr. Mirfin is passionate about access to quality-assured medicines and antibiotic resistance.

Pharm. Matthew O. Azoji

BOARD MEMBER AND WESTERN AFRICA REGION REPRESENTATIVE



Pharm. Matthew O. Azoji is a Managing Director/CEO of CHAN Medi-Pharm Ltd/Gte with over 30 years' experience as pharmacist in public health, sales, marketing, business development, procurement supply management and strategic/general management in the pharmaceutical and public health sectors of Nigeria.

Pharm. Azoji holds a first class honours degree in Pharmacy and an M. Phil. in Pharmacy Administration, an M.Sc in Public Health from University of London, an MBA in Marketing and a certificate in Pharmaceutical Policy Analysis and Pharmacoeconomics from Utrecht University. He served on the board of Ecumenical Pharmaceutical Network (EPN), Kenya from 2008 to 2014 and is currently involved in strengthening systems to enhance access to essential medicines in Nigeria. Pharm. Azoji is a fellow of the West African Postgraduate College of Pharmacists (WAPCP) and a member of many other professional bodies and global networks of professionals committed to strengthening health systems.

Dr. Tonny Tumwesigye

BOARD MEMBER AND EASTERN AFRICA REGION REPRESENTATIVE



Dr. Tonny Tumwesigye, MD (MUK), DPH (LSHTM), Msc.PH (LSHTM), is the Executive Director of the Uganda Protestant Medical Bureau (UPMB). Prior to his time at UPMB, Dr. Tumwesigye served for 10 years as the CEO and medical superintendent of Kisiizi Hospital, a 250-bed mission hospital in rural Uganda, and a Director of the Joint Medical Store and its Subsidiary for-profit companies co-owned by UPMB and Uganda Catholic Medical Bureau (UCMB). His work has included speaking and promoting healthy timing and spacing of pregnancies (FP), health systems strengthening, strengthening partnerships and scaling up innovative interventions to ensure attainment of the Sustainable Development Goals (SDGs). Dr. Tumwesigye holds, among others, a Presidential Honor: "The Presidential Distinguished Services Award for his outstanding contribution to health services in Uganda."

Dr. Djékadoum Ndilta

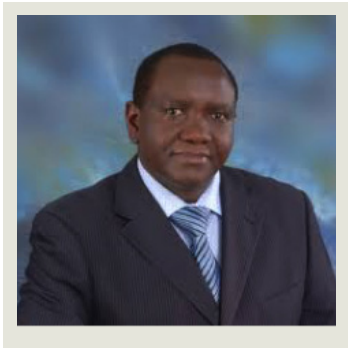
BOARD MEMBER AND CENTRAL AFRICA REGION REPRESENTATIVE



In addition to his medical degree, Dr. Djékadoum Ndilta holds a Master's Degree in Public Health and has been managing the Evangelical Hospital of Koyom, a rural district hospital, for 18 years. He was a member of the EPN Network Board from 2008 to 2014. Very involved in solving grassroots health problems in the community, Dr. Ndilta has coordinated several health projects covering the areas of HIV/AIDS, malaria, hygiene, pharmaceutical management in church health facilities and the project on maternal and child health. He is involved in various field research projects, focusing on malaria and geohelminths in rural areas. He is the Executive Director of the Evangelical Association for Health in Chad, Association Evangélique pour la Santé au Tchad (AEST).

Dr. Samuel Mwenda

BOARD MEMBER



Dr. Samuel Mwenda has served as the General Secretary and CEO of the Christian Health Association of Kenya (CHAK), a leading national FBO of Protestant churches' health facilities and programs all over Kenya. Dr. Mwenda played a key role in facilitating the start-up of ACHAP and has also created and led opportunities for South-South exchange and learning amongst members of ACHAP to build organizational capacities. He is a member of Board of Directors of MEDS and chairs the Board of the Institute of Family Medicine in Kenya. In 2016, Dr. Samuel Mwenda served as a member of the IMA World Health Board of Directors. Prior to his time at CHAK, Dr. Mwenda served for six years as the CEO of the 250-bed Maua Methodist Hospital in rural Kenya. He has also worked as a medical officer for the Ministry of Health, serving rural areas of Kenya.

Nkatha Njeru

BOARD MEMBER AND ACHAP SECRETARIAT COORDINATOR



Nkatha Njeru, MPH is an experienced public health specialist who has worked with the faith sector in Kenya and regionally for the past 15 years. Nkatha has extensive experience in health systems strengthening, where she has worked to support non-profit organizations (especially the faith-based sector) in organizational development, policy formulation, strategic planning, human resources for health, as well as aspects of health financing. She is experienced in project design, coordination and management, having provided project leadership and oversight for funding from various donor agencies and governments.

ACHAP Secretariat

The ACHAP Secretariat is based in Nairobi, Kenya. Since inception, the secretariat has been hosted by CHAK at their secretariat offices. A full-time coordinator currently staffs the secretariat, performing communications and finance & administration functions. Members provide support on an as-needed basis for technical functions.

ACHAP Activities

COMMUNICATIONS & NETWORKING

The 8th Biennial Conference

Maseru, Lesotho / February 27-March 3, 2017

ACHAP's largest networking event is the biennial conference. Various stakeholders including CHAs in the ACHAP membership, non-government organization (NGO) partners, United Nations agencies, donor agencies, academic institutions, private sector and governments attend this event.

Theme and topics

The conference theme was, “***Building Partnerships for FBO Health Systems Strengthening Towards Achievement of Sustainable Development Goals.***” Conference speakers came from government ministries, international donor agencies, private sector, NGOs and FBO/CHA leaders. Topics included global health partnership opportunities, national health sector partnership models, partnerships for evidence building and research, quality assurance practices and the influence of faith on service delivery.



Participants of the 8th Biennial Conference in Maseru, Lesotho

Conference objectives

The Conference had the following objectives:

- Understand the role of national faith stakeholders and their role in supporting the realization of SDGs in collaboration with UN agencies, national and local governments and academia.
- Take stock of the evidence-based systems that CHAs have put in place to enhance accountability and decision-making as well as advocate for partnerships with others.
- Review the existing partnership initiatives that CHAs have undertaken in the last two years to strengthen members' capacity for service delivery with emphasis on children's and women's health.
- Facilitate joint advocacy with and for the CHAs and Church Health Networks (CHNs) in Africa on matters of health systems strengthening.

- Review sustainable supply chain models that help to achieve equity and support supply of essential medicines to the most at-risk population groups.
- Enrich the knowledge base of CHAs and CHNs and participants on global perspectives of health financing facilities and requirements for partnerships from health financing partners.
- Provide an opportunity for ACHAP to hold its 8th General Assembly business meeting and review progress toward its five-year Strategic Plan for the period of 2015-2019.

Sponsors

The 8th Biennial Conference was an enormous success thanks to the generous support of the following partners:

- American Leprosy Missions
- Catholic Health Association of the U.S.
- Catholic Medical Missions Board
- Catholic Relief Services
- Christian Connections for International Health
- DIFAEM
- Emory University
- Gradian Health Systems
- G4 Alliance
- IDA Foundation
- IMA World Health
- PEPFAR
- University of Cape Town
- UNAIDS
- World Council of Churches.

The Conference was held at the Thaba Bosiu Cultural Centre in Maseru, with over 100 delegates from various countries in Africa, Asia, the US and Europe in attendance.

For this conference, the ACHAP Secretariat employed the strategy of fundraising for specific budget items rather than using open figures. We especially looked at countries of interest for various donors, pairing them with members that required support.

Following the conference, in August 2017 Gradian Health Systems—in partnership with the Churches Health Association of Zambia (CHAZ), the Society of Anesthesiologists of Zambia (SAZ), Tropical Health & Education Trust (THET), Sonergy Diagnostics and the Nick Simon’s Foundation—were awarded a two-year project of nearly \$1 million US. Through the project, the consortium would strengthen emergency care during childbirth by equipping more than 30 Zambian hospitals with Gradian’s Universal Anaesthesia Machine (UAM) and offering specialized training courses for anesthesia providers and biomedical technicians.

The grant was awarded through *Saving Lives at Birth: A Grand Challenge for Development*, a partnership led by the United States Agency for International Development (USAID) along with the Bill & Melinda Gates Foundation and the governments of Canada, Korea, Norway and the United Kingdom.

Participation in Health Mission Conferences

ACHAP at CCIH Conference 2017 & 2018

Founded in 1987, Christians Connections for International Health (CCIH) is a membership organization, of which ACHAP is a member. CCIH holds annual conferences in Baltimore, Maryland, USA. ACHAP and its

members had an opportunity to learn, exchange ideas and experiences and network at both the 2017 and 2018 conferences. In addition, ACHAP was able to meet with members that attended the conference.

Presentations by ACHAP members included the following:

2017 CCIH PRESENTATIONS

- ***Youth & Family Planning*** – Ngalande Ngalande, Churches Health Association of Zambia
- ***How Christian Health Providers in Ghana have had Remarkable Success Partnering with the Ministry of Health to Meet the Needs of the People of Ghana*** – Peter Yeboah, CHAG
- ***Pooled Procurement:*** Access to quality-assured medicines remains a major challenge in most low- and middle-income countries. The Ecumenical Pharmaceutical Network is working with four faith-based drug supply organizations in Kenya, Tanzania, Rwanda and Uganda on a Pooled Procurement Project to ensure access, affordability and availability to lifesaving medicine – Dr. Mirfin Mpundu, EPN
- ***Empowering Faith Groups:*** IMA World Health is partnering with CHAK to engage religious leaders in the slum areas of Korogocho, Nairobi, to expand demand and uptake of pediatric HIV services, successfully leveraging the influential role of these leaders on behavior change – Nkatha Njeru, ACHAP Coordinator
- ***Advocacy:*** The Churches Health Association of Zambia (CHAZ) has a robust advocacy program, resulting in agreements with the Ministry of Health committing the government to provide grants covering 75 percent of operational costs for Church Health Institutions – Ngalande Ngalande, Advocacy Officer, CHAZ
- ***The Church & Youth:*** How can the Church reach the millions of young people across the globe looking for guidance as they navigate the difficult years of adolescence and young adulthood? The Church is a force for positive change, but if we don't reach young people when they need good role models and wise counsel, we are missing an enormous opportunity. A panel of young professionals from a variety of backgrounds shared their perspectives on how to best reach the youth of today. The panel included Samuel Shanju, Programme Assistant, Ecumenical Pharmaceutical Network and Ngalande of CHAZ.
- ***Spreading Quality Innovative and Cost-Effective Care for Vulnerable Populations Through Hospital-to-Hospital Patient Safety Health Systems: A National and International Partnership Based Approach:*** The Uganda Protestant Medical Bureau, Kiwoko Hospital Uganda and the Armstrong Institute of Patient Safety at Johns Hopkins Medicine USA are ensuring quality health care services and improving patient safety by adapting and implementing the Comprehensive Unit-Based Safety Program (CUSP) model. – Dr. Tonny Tumwesigye, Executive Director, Uganda Protestant Medical Bureau
- ***The Challenges of Evidence-Based Monitoring and Evaluation in Democratic Republic of Congo*** - SANRU in the DRC shared three M&E challenges it faces in supporting evidence-based decision-making and improving health services to millions of people with an enormous amount of data - Antoine Mafwila, SANRU
- ***Religious Leaders as Champions of Change in Family Planning:*** CHAK is working with CCIH to address the unmet need for family planning by empowering religious leaders to advocate for improved resource allocation for FP and favorable public policy – Jane Kishoyian, CHAK
- ***Lessons from HIV and Malaria for Faith-Based Organizations in Africa's Transition to Managing NCDs:*** This session explored lessons from successful HIV, malaria and other infectious disease programs and the ways these can be the basis for innovative public-private partnerships to combat NCDs. The model of partnerships between faith-based providers and Novartis, a global pharmaceutical company, illustrated how FBOs can implement the call of the Addis Action Agenda for transformative PPPs to meet the Sustainable Development Goals – Jonathan Kiliko, Mission for Essential Drugs and Supplies (MEDS) and Dr. Samuel Mwenda, Secretary General, CHAK.

2018 CCIH PRESENTATIONS

The theme of the conference was “**Power of Partnership: Working Together to Serve the Kingdom.**” Nearly 180 global health experts and faith leaders joined to explore how FBOs use partnerships, including time-tested and innovative new models, in their work.

- **Report from the Field: First Augustine Fellowship Experience** – Steven Mukawa, CHAM
- **The Evolving Work of FBOs and Community-Based Primary Health Care** – Mwai Makoka, ACHAP Board member
- **Achieving Common Ground: Forging Partnerships Between Secular and Faith-Based Organizations** – Dr. Tonny Tumwesigye, UPMB
- **Health Financing in Lesotho: Purchaser Provider Agreement Between Christian Health Association of Lesotho (CHAL) and the Government of Lesotho – A 10 Year Journey** – Paseka Baptista Ramashamole, CHAL
- **Five Decades of Evolving SANRU Partnerships in DR Congo** – Malonga Miatudila, SANRU
- **Community Appropriation of Communications Efforts is Key to Engaging Communities in Health Promotion** – Mulamba Diese, SANRU
- **The Power of FBOs as Advocates** – Karen Sichinga, CHAZ and Rev. Moses M.S. Kariuki, CHAK.
- **Partnering with Local Stakeholders to Strengthen Health Services in the Northwest and Southwest Regions of Cameroon** – Pius Tih Muffih, CBCHS
- **FBOs and Immunization** – Dr. Titha Dzewela, CHAM and Dr. Albert Kalonji, SANRU.
- **Partnership Lessons from Working with Policymakers, Service Providers and Different Faiths in Providing Maternal and Mental Health Services: The Case of CHAG** – Peter Yeboah, CHAG
- **Health Systems Strengthening: Embracing Partnerships to Combat NCDs** – Jonathan Kiliko, MEDS



Peter Yeboah, the Board Chair of ACHAP and Executive Director of CHAG presented on “Lessons in Partnership from Ghana” at the 2017 CCIH Conference

Global Missions Health Conference Africa

GMHC-Africa is a community of experts in health, development and missions in Africa that come together to share their experiences, network and equip each other. Their mission is grounded on a holistic approach that emphasizes enhancing the Kingdom of God using one’s skill set. Their annual conferences are held in September, and in 2017 and 2018 the conference was held in Nairobi. ACHAP encourages its members to attend, and ACHAP secretariat staff participated in the last two conferences.

Nursing Leadership Conference

The Medical Benevolence Foundation (MBF) has collaborated with CHAs and other FBOs in Malawi in 2018 and Kenya in 2019 to hold a national conference with the aim of building the capacity of nursing and midwifery leadership in Africa. The conference provides a forum for upcoming nurse leaders to interact with other nurse leaders in their country. Representatives from ACHAP, CHAK and KCCB in Kenya are on the organizing committee for the Kenya conference to be held June 13-14, 2019, at the main campus of St. Paul's University, Limuru-Kenya. We look forward to other CHAs collaborating to hold these conferences in their countries.

Virtual Forums for CHAs

One of the greatest challenges for many of our members is connectivity. In some countries, achieving bandwidth enough to hold a Skype call is next to impossible. In other countries, the connections are erratic or controlled by government for various reasons. Despite challenges, ACHAP has managed to keep technical working groups connected through social media. Through WhatsApp groups, we have been able to share information and best practices, exchange ideas and even collect urgent information. Currently we have active technical working groups focusing on WASH at health care facilities, advocacy for family planning and monitoring & evaluation leadership at CHAs.

We also have an additional group for the francophone membership. ACHAP engaged a bilingual (English/French) communications officer to help identify and tell the stories of the ACHAP network as well as connect to our francophone membership. This has greatly increased the francophone interaction.

Engagement of ACHAP membership in DRC

Per its mandate under the UNAIDS initiative, ACHAP has actively engaged our members in DRC during the last two years to come together to form a national CHA, with the goal of ensuring coordinated health responses, especially focusing on HIV program implementation. In March 2018, ACHAP Board Chair Peter Yeboah held initial meetings with ACHAP members SANRU and Caritas Congo in DRC to set modalities for forming a national CHA platform. The World Council of Churches (WCC) supported ACHAP by inviting us to their forums in DRC, where we were able to meet other stakeholders to discuss this possibility.



Participants in the interfaith workshop on Femininity and Masculinity at Caritas Congo in Kinshasa, DRC, including Dr. Ndilta Osée Djekadoum and Emmanuella Ngororano from ACHAP

A six-member committee was formed to pilot the creation of CHA-DRC, and they agreed on the following steps for moving forward:

- Call on other Christian organizations working in the health sector in DRC to share and discuss the idea of creating a CHA-DRC,



A group discussion during the interfaith workshop on Femininity and Masculinity in DRC

- Advocate with church leadership for their endorsement, and
- Put together a road map towards CHA-DRC.

ACHAP at AIDS 2018 in Amsterdam

ACHAP's Board Chair, Mr. Peter Yeboah, and Coordinator Nkatha Njeru participated in the **“Faith Building Bridges”** interfaith pre-conference at the International AIDS Conference in 2018 in Amsterdam, The Netherlands, where representatives from FBOs, religious leaders, health care providers, activists, scientists, policymakers and other stakeholders gathered.

Njeru spoke at a session on FBO efforts to eliminate stigma and discrimination. Yeboah was on a panel on the role of faith groups in tuberculosis.



Nkatha Njeru makes a presentation at the International Aids Conference 2018 in Amsterdam

Updating and Sharing Information Platforms with CHA Members

Using quarterly bulletins and the ACHAP website, ACHAP regularly updates members on the available opportunities from partners such as webinars (e.g. on WASH in health facilities), scholarship opportunities and calls for abstracts to attend relevant conferences, exchange programs (e.g. an American Leprosy Mission and CCIH fellowship program), and many other opportunities. ACHAP consistently encouraged members to participate to learn more and improve their work.

ACHAP Website Redesigned

The ACHAP website (<https://africachap.org/>) was redesigned in June 2018 and was updated with both French and English content to allow all members and partners to access platform information and resources as well as to increase the visibility of ACHAP.

JOINT ADVOCACY

ACHAP at the 70th World Health Assembly

In May 21–25, 2017, board chair Peter Yeboah and board members Dr. Mirfin Mpundu and Dr. Mwai Makoka represented ACHAP at the WHA through the support of WCC Health & Healing, which held meetings on the sidelines of the WHA. ACHAP also had an opportunity to participate in the WCC Ecumenical Health Strategy formulation towards the SDGs.

Day of the African Child and Launch of Sermon Guides

In collaboration with Inerela+ Kenya and WCC EAA, ACHAP convened more than 500 children and young people, as well as hundreds of religious leaders in Kenya to celebrate the Day of the African Child, and to launch a call-to-action for religious leaders on treatment for HIV and TB among children and adolescents in Kenya. We also launched two sermon guides for religious leaders (Muslim and Christian) on children and HIV that were developed in collaboration with CHAK, IMA World Health and other FBOs in the country.



Religious leaders hold copies of the Sermon/Khutba Guide on Children and HIV at the launch

Advocacy on Capitol Hill

Following the CCIH conference each year, ACHAP members have an opportunity to attend a day of advocacy on Capitol Hill in Washington, DC, with CCIH. The meetings are instrumental in both informing as well as advocating with the US government on issues pertinent to our members, such as funding for health programs. Members offer both information about our different countries' contexts as well as real life stories about people that foreign assistance has supported. Meetings are held with members of Congress and/or their staffers.



ACHAP and CCIH members at Capitol Hill, Washington, DC

PEPFAR Faith Community and HIV Technical Summit

Since its inception in 2003, PEPFAR has appreciate and recognized the role FBOs play in health care. In November 2018, PEPFAR brought together faith leaders for a summit under the theme, “Firm Foundations: A Healthy Future for Children and Families.” The summit provided a forum to share innovations and solutions from FBOs toward achieving the 90-90-90 targets, especially in relation to reaching young men and children and confronting sexual and gender-based violence.

Peter Yeboah and Ms. Lebo Mothae, ACHAP vice chair and executive director of CHAL, represented ACHAP on a panel titled, *Linking Health, Faith, and Education: Indigenous Leadership from National to Local Levels*.



ACHAP Board Chair Peter Yeboah and Vice Chair Lebo Mothae at the PEPFAR and Faith Community HIV Technical Summit

ACHAP Advocacy With Partners And Agencies

ACHAP Board Chair Peter Yeboah, Vice Chair Lebo Mothae and Coordinator Nkatha Njeru have engaged both potential and current partners with a view of exploring partnership towards fulfilling ACHAP’s mission. The following is a summary of these engagements:

Friends of ACHAP-USA

Several organizations and individuals in the US that have continued to support ACHAP in various ways have come together to form “Friends of ACHAP-USA” to pull their different capacities together to support ACHAP. These organizations/individuals include:

- Adam Slote/Catholic Relief Services
- John Blevins/Emory University
- Jean Duff/Joint Learning Initiative (JLI)
- Bruce Compton/CHA-USA
- Rick Santos/IMA World Health
- Dennis Cherian/World Vision
- Deb McFarland/Emory University
- Frank Dimmock/Presbyterian Church (USA)
- Mona Bormet/CCIH

IN DELIBERATIONS WITH THEM, WE AGREED ON THE FOLLOWING:

- ACHAP/CHAs play a critical role in health systems.
- There are variations between CHAs’ technical and organizational capacities and involvements with health system and governments.
- ACHAP/CHAs have a critical unmet need for:
 - Resource mobilization/fundraising/business development
 - Improved data collection, management, analysis and use
 - Research (e.g. comparative analysis, performance, financing contracts) for building the evidence base
 - Organizational capacity building (e.g. CHA-to-CHA study tours)
 - Increased visibility among donor partners at country, regional and international levels
 - Strengthening linkages between community and health systems
- ACHAP has the potential to facilitate CHA capacity building initiatives
- There is a growing commitment and goodwill toward ACHAP/CHA development and success.

The following suggestions towards strengthening ACHAP/CHA capacity, based on already available capacities, were formulated during the discussions:

- Funding for clear strategy/work plan (CRS)
- Enhancing web platform for communication (JLI)
- Small consulting group that can provide specific technical support to priority CHAs/ACHAP
- Business development for upcoming USAID bids (quality improvement, health governance and financing)
- Research students (Emory University and Notre Dame) to undertake research studies.

Exploring WASH: Global Water 2020/JLI

A small group of people with extensive experience in international water work, especially in advocacy, financing, diplomacy, and implementation, has come together in Washington, DC, for a two-year period under Global Water 2020.

This group is interested in several water-related issues, including water, sanitation & hygiene (WASH) in health care facilities. Global Water 2020 has engaged ACHAP to implement the WASH project in health facilities. The expectation is that ACHAP's leadership could have far-reaching results, including reminding many secular entities of the central role of FBOs in providing invaluable health care. Our members in Zimbabwe, Lesotho, Ghana, Uganda (UCMB) and Kenya have received training and are engaged in phase 1 of the project.

The following activities have taken place toward this initiative: (*see capacity building section*)

- Assessment of WASH conditions in selected ACHAP member countries
- Training of ACHAP-related health care providers in measuring WASH conditions in participating countries (two in each country)
- Use of WHO's WASH Facility Improvement Tool (FIT) to remedy inadequate WASH conditions
- Submission of proposals and consideration by Global Water 2020
- Implementation of WASH projects in the 5 countries (ongoing).

Brother's Brother Foundation

Founded in 1958, BBF is a gift-in-kind charity focusing on medical and educational needs—medicines, medical equipment, text books, educational supplies and disaster aid—around the world. In a presentation to ACHAP, BBF president Luke Hingson explained that the mission of Brother's Brother Foundation is to promote international health and education through the efficient and effective distribution of donated medical, educational, agricultural supplies and other resources. All BBF programs are designed to fulfill its mission by connecting people's resources with other people's needs.

BBF accepts and redirects in-kind donations from individuals and corporations that include publishers, pharmaceutical companies, health institutions and more, usually in the form of surplus supplies and equipment. Through its connections, BBF then matches these donated resources to the needs of people across the world.

BBF is interested in collaborating with ACHAP for several reasons:

- ACHAP has wide reach in the Africa region.
- The membership in different countries would be helpful in consolidating needs across the country, making the provision of various resources more efficient.
- BBF expressed that one of their greatest challenges was ensuring efficient distribution by bulking various orders in a container for multiple organizations in a country. Additionally, a national CHA would be in a better position to provide support for port clearance per the country's laws and regulations.

Following the meeting, ACHAP connected BBF with CHA-Nigeria. We have also shared information on the organization through our communication to members.

For more information, please see <https://www.brothersbrother.org/>



Luke Hingson, right, hosts members of ACHAP at the BBF warehouse

IMA World Health

IMA World Health has collaborated with ACHAP for many years, providing core support for the Secretariat. ACHAP is grateful for the consistent support that has been provided by IMA over the years, including convening the ‘Friends of ACHAP’ meeting, providing substantial support to the biennial conferences as well as providing ongoing communications support—such as the recent website redesign—for the Secretariat. The ACHAP board holds frequent meetings with IMA to discuss the partnership as well as to renew the MOU.

In January 2019, IMA announced that they had joined forces with Lutheran World Relief, an international FBO/NGO based in Baltimore, USA, to increase their impact in the world. Ambassador Daniel V. Speckhard, president and CEO of Lutheran World Relief, will lead the unified organization. Rick Santos, who served as CEO at IMA World Health for the past nine years, will serve as a senior advisor for the transition. ACHAP hopes to continue collaborating with the new organization.

Center for Faith-Based & Community Initiatives at USAID

Working closely with faith-based and community stakeholders is critical to the success of USAID’s mission. These efforts are coordinated through USAID’s Center for Faith-Based and Community Initiatives (CFBCI). ACHAP **provides a bridge** for faith-based and community groups seeking to connect with USAID’s mission by directing them to appropriate points-of-contact within the agency, offering resources to help guide them through the partnership process and providing information about new grant opportunities.

ACHAP convenes faith-based and community groups to **catalyze new opportunities** for collaboration between these groups and the government. It also helps to **eliminate barriers** encountered by faith-based and community organizations seeking to partner with USAID on a range of global development issues including global health, child survival and food security.

ACHAP at the Vatican

On December 7, 2018, ACHAP Board Chair Peter Yeboah participated in a high-level forum at the Pontifical Academy of Science at the Vatican to scale up pediatric HIV/AIDS diagnosis and treatment. During the forum, Yeboah read an official statement from ACHAP that highlighted the strengths and capacities of faith-based health systems and facilities in sub-Saharan Africa and underscored ACHAP’s enduring commitment to leverage its privileged access to hospitals, schools, churches and interfaith platforms to create demand for testing and treatment and help eliminate institutionalized and embedded HIV-related stigma and discrimination in health care settings, families and communities. **Read the full statement in Annex 1.**

CAPACITY BUILDING

Family Planning Advocacy Training

In February 2018, the Christian Health Association of Zambia (CHAZ), who chairs the ACHAP communications and advocacy technical working group, hosted advocacy champions from five ACHAP member countries—Uganda (UCMB), Sierra Leone (CHASL), Malawi, Ghana and Nigeria—for a family planning advocacy training workshop. Each CHA has developed an advocacy strategy following this training, which will lead to great changes in FP programming in these countries. The training was supported by PAI, a longtime partner to CHAZ, whose mission is to promote universal access to reproductive health and reproductive rights through research, advocacy and innovative partnerships.



Advocacy champions at the family planning advocacy training workshop in Zambia

WASH in Health Facilities

The ACHAP Secretariat, in partnership with Global Water 2020 & Emory University, hosted a training on WASH in health facilities during the second week of June 2018 in Nairobi, Kenya. The training brought together participants from five CHAs from Lesotho, Ghana, Zimbabwe, Uganda and Kenya. Using the WASHCon assessment tool developed by the Centre for Global Safe WASH, Emory University, the trainees learned how to assess the WASH conditions of health facilities to consequently improve WASH conditions of member health facilities in their respective countries.



WASH in Health Centers Trainees from Lesotho, Uganda, Kenya, Zimbabwe and Ghana in Nairobi, Kenya

Learning How To Tell Impactful Stories

In May 2018, IMA World Health collaborated with ACHAP to build capacity of CHAs in storytelling, photography and communications ethics and to create a support and sharing network among field and communications staff.

The training was held in Nairobi, Kenya, and 22 staff from five ACHAP members were trained. The new ACHAP communication intern was also part of the training.



Participants at the capacity building training in storytelling, photography and communications ethics held in Nairobi

Eliminating HIV Stigma and Discrimination at Health Facilities

In July 2018 ACHAP, in partnership with the Christian Health Association of Nigeria (CHAN), worked with 20 mission health facilities in four states within Nigeria (Benue, Plateau, Enugu and Oyo) towards elimination of HIV-related stigma and discrimination at health facilities. Forty health workers and religious leaders from the health facilities' sponsor congregations participated in a training of trainers (TOT) workshop to empower participants to pass on the information to other health workers and within the sponsor congregations. The training was also supported by Nigeria Agency for the Control of AIDS (NACA), Inerela+ Nigeria, The Network of People Living with HIV/AIDS in Nigeria (NEPWHAN).



Health workers at the training organized by ACHAP and CHAN on elimination of HIV-related stigma and discrimination

Towards Health Systems Strengthening

In order to identify capacity gaps as well as strengths to leverage as a platform, ACHAP is conducting an assessment using a Rapid Organizational Capacity Assessment Tool (ROCAT) developed with the support of a health systems strengthening consultant and the University of Cape Town (UCT). Once the assessment is completed, ACHAP will work together with the CHAs on action plans that will include peer-to-peer mentorship visits in the coming months. The ROCAT is designed to be self-administered by a team from the responding organization. The utility and benefit of the findings to each organization will only be as good as its responding team's ability to take the time to carefully and honestly respond to the questions asked in the tool.

PARTNERSHIP

Caritas Internationalis Pediatric HIV Meeting, June 2017 / Abuja, Nigeria

As an implementing partner of UNAIDS HIV/AIDS Phase 1 project, ACHAP was invited to participate in a regional consultation forum held at the Transcob Hilton Hotel in Abuja Nigeria on June 14-16, 2017. ACHAP chair Peter Yeboah participated in this consultation that brought together Tanzania, Zimbabwe, Nigeria and DR Congo to strategize for the UNAIDS/PEPFAR faith initiative.

The theme of the consultation was "Early Diagnosis and Treatment for HIV-Positive Children and Strengthening Engagement of Faith based Organizations," and its primary purpose was to promote wider engagement of national and local FBOs as well as national governments and pharmaceutical and diagnostic companies in the overall program of action toward implementing the UNAIDS strategy, "Start Free. Stay Free. AIDS Free." Other ACHAP members at the meeting included Zimbabwe's ZACH, represented by Executive Director Ms. Vuleywa Chitimbire and Nigeria's CHAN, represented by its former Secretary General Dr. Daniel Gobgab.

The East Africa Community Health Desk Consultation, June 2017

The re-establishment of the East Africa Community in 1999 provided an opportunity for countries in the region to work together towards diseases surveillance, epidemic control and prevention of spread of diseases. Under the invitation of the Technical Working Group (TWG) on Control and Prevention of STIs, HIV& AIDS of the EAC health desk, the ACHAP Secretariat staff Nkatha Njeru and Mike Mugweru respectively participated in two national consultations in Kenya organized by the health desk of the East African community. The consultations were aimed at drafting of the regional HIV strategy for key population and the regional HIV M&E protocol.

M-Health Partnership with Medic Mobile

Medic Mobile uses communication technologies to improve the health of underserved and disconnected communities. The organization has developed an open-source mobile and web software toolkit that combines smart messaging, decision support, easy data gathering and management, and health system analytics. The software runs on many types of devices, including feature phones, smartphones, tablets and desktop computers. Health workers and families can use the software to help monitor pregnancies, track outbreaks faster, treat illnesses, keep stock of essential medicines, communicate about emergencies and more. In April 2018, ACHAP began talks with Medic Mobil towards launching a partnership that would offer this solution to CHAs. Monitoring and evaluation officers of 14 CHAs completed a virtual orientation session on the solution. Various CHAs are currently at different stages of engaging with Medic Mobile to deploy the solution. The software is offered at no cost to the CHA; however, the CHA takes care of any associated hardware, equipment, training and maintenance costs.

UNAIDS & PEPFAR Faith Initiative

FBOs have played an integral role in HIV response since the early days. In September 2015, PEPFAR and UNAIDS launched a two-year initiative that will strengthen the capacity of faith-based leaders and organizations to advocate for and deliver a sustainable HIV response. It is clear that community and faith responses are key to the scale up to achieve the ambitious 90-90-90 targets and the PEPFAR 3.0 goals—and in making sure that no one in need of treatment is left behind. The goals of the initiative are as follows:

- Collect, analyze and disseminate data on health care services provided by FBOs
- Address stigma and discrimination in communities and health care settings
- Demand creation and retention in care: Build capacity for joint action between communities of people living with HIV and faith to increase demand for HIV services and retain people in care
- Strengthen HIV and AIDS-related service provision: Strengthen networks of faith-based health service providers—including Christian, Islamic and others—to reach the most marginalized and at-risk populations with comprehensive, equitable HIV testing, prevention and treatment services through strengthened national partnerships, improved data collection and careful monitoring and evaluation
- Leadership and Advocacy: Strengthen FBO leadership and advocacy for the Fast-Track Approach and a sustained AIDS response to end the global AIDS epidemic by 2030.

Below is a summary of ACHAP's implementation in phases 1 & 2 of the project.

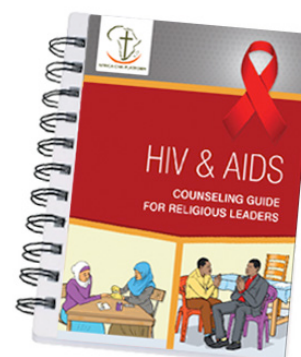
Objective 1: Build capacity of CHAs towards increasing effectiveness and efficiency of HIV programming and, hence, accountability of the contribution of CHAs to the global HIV agenda.

ACTIVITY 1. Identify and build the organizational and human resources capacity of four newer, smaller faith-based health service providers in implementing HIV programs through in-person and distance learning with well-established, highly effective FBHSs. This activity was completed successfully. CHAs paired as follows for joint learning:

Region	Mentee	Mentor
Eastern	CSSC (Tanzania)	UPMB (host) & UCMB Uganda
Western	CHA Liberia	CHA Ghana
Central	AEST (TCHAD)	Caritas Congo (host) SANRU IMA World Health
Southern	CHA Malawi	CHA Zambia

ACTIVITY 2. Identify and equip faith leaders committed to the HIV agenda in Kenya and Zambia with skills and knowledge to implement relevant programs in their communities. The following activities were accomplished:

- Consultative forum held with religious leaders, theologians, academic institutions and national agency representation (NACC & NASCOP) towards development of counseling guide for religious leaders
- Draft document finalized.



Manual endorsed by NACC, piloted & launched

Objective 2: Strengthen health information systems (HIS), knowledge management and learning among the ACHAP network towards measuring faith-based contribution to the HIV response, improving data use for program improvement at faith-based sites as well as ensuring accountability by the faith sector.

- M&E plan has been developed, shared with the board and approved
- Access to necessary coding has been sought and obtained
- Draft list of indicators has been developed for discussion
- Contact with CHA M&E leads has been established
- CHA M&E leads are regularly updating the database with up-to-date indicators.

Objective 3: To facilitate knowledge sharing of lessons learned and best practices within the ACHAP network and externally at global level.

ACTIVITY 1: Develop learning and skills-building training sessions to be presented at the biennial meeting of ACHAP member FBHSs. ACHAP successfully completed the following, in collaboration with the academic consortium:

- Developed content for preconference

- Held training sessions at the preconference institute
- CHAs now engaging based on pointers at the pre-conference, such as diversification of funding, collaboration with academic institutions and engagement in research

ACTIVITY 2: Strengthen the ACHAP TWGs to function as a technical resource for ACHAP members. Create an online learning platform for the ACHAP TWGs to share knowledge and best practices and offer technical consultation. The following have been completed:

- Resources for health systems strengthening have been identified (more work is needed to identify the best repository for CHAs to access them)
- Skype meetings scheduled and held with TWG leads to discuss functionality and the use of the online platform
- Survey on the HSS gaps to inform next steps of the TWGs
- Review meeting September 25-30 in Nairobi by the board to further help to elaborate a clear TWG agenda.

During Phase 2 of the project, the following activities were accomplished:

- **TOT on stigma and discrimination in Nigeria.** ACHAP, in partnership with the Christian Health Association of Nigeria (CHAN), trained 50 health workers and religious leaders as TOT from health facilities in Benue, Plateau, Enugu and Oyo states. ACHAP identified various curricula from which content could be borrowed, and the content was finalized and used as a training guide. UNAIDS asked that we also engage the faith leaders in communities around these health facilities. CHAN has been in contact with Inerela+, Nigeria Chapter (NINERELA), to work towards this.
- **Health systems gaps assessment (May 2018)** for CHAs has been completed, and we are working with a health systems strengthening expert to support the CHAs to prepare work plans for remedying their existing gaps. With the consultant, ACHAP came up with a tool for assessing HSS gaps within the ACHAP network. In Phase 2, ACHAP conducted the survey supported by the University of Cape Town of the UNAIDS initiative. The tool was shared with CHAs to ensure quality as well as numbers in response. A lot of time was spent corresponding with CHAs, but we are hopeful that the results of this survey will be useful in strengthening gaps identified.
- **Peer mentorship.** Peer mentorship visits are planned upon receipt of the HSS assessment report, which is being finalized. It is expected the report will identify HSS gaps as well as strengths of various CHAs. As a result, the project will support four CHAs to engage in exchange visits to learn from each other in early 2019.
- **Enhancing capacity of CHAs in M&E towards reporting on HIV/AIDS indicators to their national systems.** Early 2018, ACHAP engaged M&E officers/designees at CHAs to report on preselected performance indicators each month. ACHAP is working on compiling a report that is shared as the contribution of ACHAP to HIV/AIDS through our various media. CHA Lesotho provided an M&E officer to coordinate this activity including the collection, analysis and preparation of a monthly report. This helped to improve reporting by the CHAs to their national systems.

World Mission Evangelism Conference & 70th Anniversary of the WCC

In March 2018, The World Council of Churches (WCC) held its 70th anniversary and conference in Arusha, Tanzania, with the theme: *Moving in the Spirit: Called to Transforming Discipleship*.

At a glance, one would wonder how ACHAP fits into a conference of about 1,000 Christian leaders from diverse denominations. Fortunately, amongst the various conference workshops was the health and healing workshop with the sub-theme: *Churches as Healing Communities*. This workshop, comprised of Church leaders, WCC, ACHAP and other delegates, explored the mandate and mission of the Church in health and healing as integral to evangelism from the margins.



*ACHAP Board Chair Peter Yeboah
with Dr. Mwai Makoka, ACHAP Board
Member and Program Executive for
Health & Healing, WCC*

Consequently, this newfound appreciation of Jesus Christ's healing ministry provides some pointers and opportunities towards promoting the development and sustainability of holistic health and healing. The prospects include building strategic alliances and partnerships between ACHAP and Church leadership towards achieving universal health coverage and the health-related SDGs. It is time for ACHAP to aid the Church to consolidate its historic investments and missional role in health (Matthew 10:1-42).

Our Approach

ACHAP's strength lies in its members, and it has grown through leveraging resources, expertise and shared learning from its members, partners and other regional bodies. Member CHAs have participated in joint projects, technical seminars, exchange and learning workshops.

ACHAP has engaged CHA M&E officers, who have been supportive in finding innovative ways of working to fill the gaps on documentation. Members have created a platform on which common challenges are shared and discussed in order to identify small projects of common interest that members can work on and find solutions together.

During the 2017-2018 period, members actively participated by providing in-kind support. Two members who have not been active renewed their memberships, and one of them is working with ACHAP as a co-host of the 9th Biennial Conference to be held in Cameroon in February 2019. Additionally, the Christian Health Association of Kenya (CHAK) has been hosting the ACHAP Secretariat since inception in 2007 and provides office space and other office supplies to the secretariat team based in Nairobi. Members also contribute knowledge and information that is published in the ACHAP website and in the quarterly bulletins or other related forums.

Resource Management

The ACHAP Secretariat is headed by a coordinator who leads implementation. ACHAP is legally registered in Kenya and manages independent bank accounts. ACHAP's financial systems meet internationally accepted standards. ACHAP accounts are audited on an annual basis, and the audited accounts are presented at the Annual General Meeting for approval.

Sustainability Strategy

The 2017 General Assembly meeting resolved to continue supporting the ACHAP Secretariat and the network at-large through the following means:

- Increasing in kind support from members, partners and donors
- Identification of long-term partners and donors to walk with ACHAP in the implementation of its strategic plan 2015-2020
- Strengthening the ACHAP Secretariat through technical assistance from partners and donors
- Establish and strengthen strategic partnerships and collaborations to leverage limited resources
- Continued use of the TWG approach as a mechanism to fundraise for technical activities and interventions.

MEMBERSHIP

Information on how to become a member is available on our website, www.africachap.org.

ACHAP Members

NO.	COUNTRY	MEMBERS	ACRONYM
Central Africa			
1	Cameroon	Conseil des Eglises Protestantes du Cameroun	CEPCA
2	Cameroon	Cameroon Baptist Convention Health Services	CBCHS
3	Central Africa Republic	Association des œuvres Medicales pour la Santé en Centre Afrique	ASSOMESCA
4	Central Africa Republic	Communauté Baptiste au Centrale de l'Afrique (CBCA)	CBCA
5	Chad	Koyom Hospital/ Bureau d'Appui Conseil	AEST
6	D. R. Congo	Eglise du Christ au Congo ECC/CARITAS Congo.Eglise du Christ au Congo ECC	ECC
7	D. R. Congo	CARITAS Congo	
Eastern Africa			
8	Burundi	Communauté des Eglises de Pentecôte au Burundi, CEPBU	CEPBU
9	Sudan	Christian Health Association of Sudan	CHAS
10	Ethiopia	Ethiopia Evangelical Church Mekane Yesu:Development & Social Services Commission	EECMY - DASSC
11	Kenya	Christian Health Association of Kenya.	CHAK
12	Kenya	Kenya Episcopal Conference	KCCB
13	Kenya	Mission for essential Drug Supply	MEDS
14	Kenya	Ecumenical Pharmaceutical Network	EPN
15	Rwanda	Bureau des Formations Médicales Agréées de Rwanda	BUFMAR
16	Rwanda	CARITAS Rwanda	
17	Tanzania	Christian Social Services Commission	CSSC
18	Tanzania	Mission for Essential Medical Supplies	MEMS
19	Uganda	Uganda Protestant Medical Bureau (UPMB)	UPMB
20	Uganda	Uganda Catholic Medical Bureau (UCMB)	UCMB
21	Uganda	Joint Medical Stores	JMS

NO.	COUNTRY	MEMBERS	ACRONYM
Southern Africa			
22	Angola	Christian Medical Commission of Angola	CMCA
23	Botswana	Associations of Medical Missions of Botswana	AMMB
24	Lesotho	Christian Health Association of Lesotho	CHALe
25	Swaziland	Churches Forum on HIV/AIDS Republic of Swaziland	CFHA
26	Madagascar	Eglise du Jesus Christ à Madagascar/Church of Jesus Christ in Madagascar	FJKM
27	Malawi	Christian Health Association of Malawi	CHAM
28	Namibia	Council of Churches in Namibia	CCN
29	South Africa	Christian Aids Bureau for S.A	CHASA
30	Zambia	Churches Association of Zambia	CHAZ
31	Zimbabwe	Zimbabwe Association of Church Related Hospitals (ZACH)	ZACH
West Africa			
32	Benin	Association des Œuvres Médicales Privée confessionnelles et sociales au Benin	AOMPCB
33	Burkina Faso	Union Chrétienne Médicale et Paramédicale de Burkina	UCMP
34	Burkina Faso	Assemblée de Dieu De Burkina Faso (ASAD)	ASAD
35	Ghana	Christian Health Association of Ghana	CHAG
36	Guinea	Mission Philafricaine	MPA
37	Ivory Coast	Hopital Baptiste de Torgokaha/Hopitaux Baptistes De ferke. Centre Médico - Social Baptiste de Torgokaha	HBDF
38	Liberia	Christian Health Association of Liberia	CHAL
39	Mali	Association Protestante de la Santé au Mali	APSM
40	Niger	Union des Eglises Evangéliques Protestantes au Niger	UEEPN
41	Nigeria	Christian Health Association of Nigeria	CHAN
42	Nigeria	CHAN MEDIPHARM	CHAN-MEDIPHARM
43	Sierra Leone	Christian Health Association of Sierra Leone	CHASL
44	Togo	Association Protestant des Oeuvres Medicosociales du Togo	APROMESTO

Annex 1: ACHAP Statement on Pediatric HIV at the Vatican

STATEMENT BY THE AFRICA CHRISTIAN HEALTH ASSOCIATIONS PLATFORM AT THE HIGH-LEVEL DIALOGUE TO SCALE UP DIAGNOSIS AND TREATMENT OF PAEDIATRIC HIV HELD AT THE PONTIFICAL ACADEMY OF SCIENCE-VATICAN ON DECEMBER 7, 2018

Introduction

The Africa Christian Health Association Platform (ACHAP) is a network of 41 national Christian Health Associations (CHAs) located in 30 countries in sub-Saharan Africa. Together, we have over 5,000 health facilities and provide/contribute between 30-70 percent of national health services in sub-Saharan Africa. Collectively ACHAP has access to a catchment population of over half a billion. Being champions of social justice and equity, our primary targets are the vulnerable, marginalized and neglected segments of the society.

Capacity & Reach

We have access to three (3) safe unique public unique spaces: **Hospitals, Schools and Church Pulpit-Pew Community**. These public spaces provide entry points and convening platforms in the provision of effective, high quality HIV/AIDS care, treatment and prevention services, which complement national public health programs across sub-Saharan Africa countries.

Commitment to Uptake of Pediatric Formulations of Anti-retroviral medicines

Towards the uptake of priority pediatric formulations of antiretroviral medicines, and within the 95-95-95 targets, ACHAP commits to a Fast-Track innovative response to make HIV testing and treatment available, accessible, affordable and acceptable for children and adolescents by 2020 and beyond. We would, therefore, accelerate early HIV testing, treatment initiation, retention in care and viral load suppression for children and adolescents, in addition to a host of primary and secondary prevention interventions.

In this regard, ACHAP would leverage our privileged access to hospitals, schools, churches and interfaith platforms to create demand for testing and treatment and help eliminate institutionalized and embedded HIV-related stigma and discrimination in health care settings, families and communities.

Call to Action

“If there ever was a time to change words into action, it is today.” **Deborah Birx**, United States Global AIDS Ambassador

ACHAP affirms the above quote with a renewed call to commitment and action. Given the various universal recognitions and affirmation of FBOs as the cornerstone of global response to the HIV epidemic, ACHAP calls on stakeholders, implementing partners, development partners, etc., amongst others, to:

1. Strengthen or contemplate direct or intimate strategic and operational partnership with FBOs in terms of resource allocations & technical assistance to enable FBOs to implement national HIV strategies in their own unique compassionate and impactful ways.
2. Build the capacity of faith-based service providers or strengthen faith-based health systems, and address supply chain challenges to deliver accessible, affordable, acceptable and sustainable, quality HIV services for children, adolescents, families and communities.

Closing

“Children cannot speak for themselves. They need us to speak for them.” **Monsignor Robert J. Vitillo**: Attaché for Health, Permanent Mission of the Holy See to the UN in Geneva

I wish to reference and paraphrase the above quote to say: *“The millions of children living with HIV cannot ACT for themselves. They need us to ACT for them.”*

Your Eminence, Distinguished Members of this Dialogue, a road map and Action Plan that would harness or optimize the untapped synergies of faith-based health systems to achieve the 95-95-95 targets especially for children and adolescents is intuitive and imperative. In this regard, ACHAP assures this forum that its commitment and collaboration with a coalition of the willing to **find, test, treat and retain undiagnosed children and adolescents** will remain timeless.

Thank you.

Signed, read and submitted by:

Peter Yeboah
Chairman, ACHAP

Annex 2: ACHAP PRESS STATEMENT ON PEPFAR FAITH COMMUNITY AND HIV TECHNICAL SUMMIT

ACHAP CALLS ITS CHRISTIAN HEALTH ASSOCIATIONS-MEMBERS TO RENEW THEIR COMMITMENT TOWARDS ACHIEVING HIV EPIDEMIC CONTROL IN SUB-SAHARAN AFRICA AT THE U.S. PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF (PEPFAR) FAITH COMMUNITY AND HIV TECHNICAL SUMMIT

“The provision of compassionate and comprehensive family and client-centered HIV prevention and treatment services shall be ACHAP’s value addition in the global efforts at meeting the 90-90-90 targets,” said Peter Yeboah, the ACHAP Board Chair

Accra, Ghana 1 December 2018 - In advance of *World AIDS Day 2018*, Vice President Michael Pence announced that the United States government, through the President’s Emergency Plan for AIDS Relief (PEPFAR), will invest \$100 Million to address key gaps toward achieving HIV Epidemic Control Including through Faith-Based Organizations and Communities. **PEPFAR recognizes Faith-Based Organizations and Communities as Cornerstones of HIV Epidemic Control with \$100 million investment** The Africa Christian Health Association Platform (ACHAP) welcomes this announcement as recognition of our collective accomplishments, and affirmation of ACHAP members’ ongoing efforts in the global AIDS response. ACHAP further views PEPFAR’s announcement as a unique opportunity for CHAs to consolidate the remarkable progress and contributions made in the past. Of essence, a new window/pathway has been opened for FBOs to formulate innovative approaches to reaching young men, adolescent girls and young women. Consistent with our Christian values of targeting and protecting vulnerable groups and needy populations, ACHAP therefore renews its commitment to prevent sexual violence against children and women, which significantly increases their risk of HIV infection. As a Christian FBO, ACHAP is committed to holistic health and healing of the human person. Therefore, the provision of compassionate and comprehensive family and client-centered HIV prevention and treatment services shall be ACHAP’s value addition in the global efforts at meeting the 90-90-90 targets. Friends and ACHAP members, let us seize the moment to promote Jesus Christ’s healing ministry with renewed commitment towards achieving HIV Epidemic Control in Sub-Saharan Africa.

Peter Yeboah

Board Chair

Africa Christian Health Associations Platform -ACHAP