

CASES IN GLOBAL HEALTH DELIVERY

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loveLife: preventing HIV among South African youth (Part B)

“It’s very difficult for a program like loveLife to get funding. We try to sit at the frontier, and that doesn’t lend itself to most current funding models. That’s where the Kaiser Family Foundation’s sustained support was so incredible. They said, ‘Go forward and be different.’”

-- David Harrison, loveLife CEO, 2000-2009

“A different management strategy is required for scaling up and operating at scale, but just maintaining scale is hard work. It’s a massive undertaking.”

-- Grace Matlhape, loveLife CEO, 2009-

2006-2009: Moving Forward

A week after the Global Fund Board decided not to renew loveLife’s funding, loveLife managers drafted a new five-year strategic plan called “Brave New World.” In the first few weeks of 2006, loveLife shrank its staff from 420 to 280 people. loveLife CEO, David Harrison, and members of its Board of Trustees lobbied the South African government to step into the breach. Meanwhile, Kaiser’s Senior Vice President with responsibility for its South African operations, Michael Sinclair, set about persuading the National Department of Health and National Treasury to accelerate the projected increase in governmental funding. Sinclair recalled:

We marshaled every effort to reverse the Global Fund decision. When it became clear that wasn’t going to happen, I had very frank and long discussions with the Minister and Director General of Health and with the senior officials at National Treasury about the implications of the possible collapse of loveLife and the kind of additional support that the government would have to provide to keep loveLife going.

Sarah Arnquist and Rebecca Weintraub prepared this case for the purposes of classroom discussion rather than to illustrate either effective or ineffective health care delivery practice.

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Between 2005 and 2006, South African government funding to loveLife more than doubled from USD 6.8 million to USD 16.2 million. By 2008 loveLife's revenues totaled USD 21.7 million; Kaiser funded 16%, and the South African government funded 75% (see **Exhibit 1** for financial chart). Helene Perold, author of loveLife's 10-year strategic review, reflected on this achievement:

loveLife was operating in a very hostile environment. Everywhere around them was hostility. Besides the President's blind spot on HIV, you cannot discount the power of traditionalism in African culture and the ongoing relegation of young people into positions of powerlessness. loveLife leaders worked incredibly smart because even within this hostile environment they managed to source state funding. It's very clear that strategically they knew what they were doing. They knew who to talk to and managed to tread this terrain exceptionally well.

Yet, loveLife struggled to emerge from the negative shadow of the Global Fund decision and attract new international funding. Some donors considered loveLife's unpredictability and tendency toward controversy too risky. The only new international funding loveLife received between 2006 and 2009 was a USD 3.65 million, 2.5-year grant from the Bill and Melinda Gates Foundation to support the goGogetter Program, a network of 500 grandmothers who provided care and support to orphaned and vulnerable youth.

Programs

Following the Global Fund decision, loveLife cut the National Adolescent Friendly Clinic Initiative to save costs. loveLife would no longer manage a national public clinic quality improvement program. loveLife continued working indirectly to make clinics "youth friendly" and encourage teens to use reproductive health services. loveLife maintained its primary focus on 12- to 17-year-olds but expanded some programs up to age 20. This change was spurred by the recognition that the greatest jump in new HIV infections occurred among women ages 19 to 21 as they left school, began relationships with older men, and often became pregnant. No national prevention program existed for this vulnerable group.

While loveLife began reaching out to some older youths, it also narrowed its focus to youths living in urban slums. loveLife's media director recalled, "I pushed us to define who we were talking about and why we're talking to them. In the increasingly competitive world of media, you have to be really targeted."

Most of the government funding for loveLife was earmarked for training and paying young adult groundBREAKERS (GBs) to work as peer educators and implement loveLife's programs at franchise organizations, youth centers, clinics, and schools. The government considered this an investment in youth leadership development as well as HIV prevention. Increasingly, loveLife focused on implementing its school-based program. GBs gained permission from school principals to implement the "loveLifestyle" curriculum. More schools wanted to participate than loveLife could reach. Funding remained flat after 2006, meaning the number of GBs did too.

Traditionally, Kaiser had funded loveLife's media programs. Kaiser's financial support declined as originally planned, and media comprised a smaller portion of loveLife's budget. In 2008 loveLife devoted 8% of its budget to media. That year, loveLife shifted all billboard funding over to developing MYMsta, a mobile-phone-based, social networking program that connected youth with each other as well as with development and employment opportunities.

When the billboards disappeared, though, some people thought loveLife had ended. Most people were unaware that for years more than three-quarters of loveLife's budget (84% in 2008) had gone toward interactive programs. Perold recalled, "loveLife had established an extraordinary programmatic infrastructure that people knew nothing about. Perhaps they were so focused on doing the work that

loveLife did a poor job of communicating to the wider public their emphasis on programs that reached young people at grassroots level.”

Managing Cash Flow

With the increased government funding, loveLife gained financial security but not without tradeoffs, as described by an internal document:

Managing the relationship is time intensive. But the relationship is surely paving the way for other public-private partnerships bound to characterize service provision in the future. More challenging is the impact on loveLife’s flexibility as a campaign. As a higher proportion of its funds are received from government – and directed toward institutionalization of key services – loveLife risks losing its sensitivity of response to the changing epidemic. The greatest challenge is that the wheels of collaboration grind slowly, and often new gains demand a fast-paced response.

As Kaiser’s funding decreased, loveLife became more vulnerable to cash-flow problems caused by the government’s slow funding processes. Unlike international donors that paid up-front, the government reimbursed loveLife on a quarterly basis. Cash-flow problems became most intense around March and April because loveLife and the government operated on different fiscal-year calendars. Paying staff was always the top priority, but twice in 2008 salary payments were late. “When that happens, it’s very difficult to build back the staff’s sense of security,” said Grace Matlhape, loveLife deputy CEO. Good communication between managers and their staff and across departments was essential to managing the cash droughts.

To improve cost management and supply distribution, loveLife stopped outsourcing nearly all services in 2008, including supply procurement, fleet management, media programs, training, and conference planning. “We brought all that in house and experienced considerable savings, as well as better relationship management,” said the director of operations. The national office purchased all program supplies and distributed them nationally based on formulas derived from the central monitoring system. loveLife contracted several suppliers for the same service, thus avoiding owing a single company large sums and helping it meet the government requirement to work with black-owned businesses. Additionally, all vendor contracts stipulated that loveLife had 90 to 120 days to pay interest-free.

Organizational Structure

In 2007 loveLife reorganized again, returning to a system of nine provincial offices overseeing 23 regional offices. This change was intended to reduce direct reporting to the national office. The strongest, most capable managers were put in charge of the provincial offices. In 2008 loveLife’s national infrastructure, in terms of number of locations and youths reached, was unmatched by any South African youth-focused organization. loveLife had 99 staff at the national office, 308 at the provincial and regional levels, 1,200 paid GBs, 500 paid goGogetters, and 7,000 volunteer peer educators. They reached 800,000 youths through 800 community “hubs” and implemented the loveLifestyle curriculum at 2,000 of the nation’s 12,000 secondary schools.

In 2008 loveLife distributed 6 million copies of its youth magazine and broadcast 2,800 radio and 1,000 television public service announcements. That year, the youth telephone hotline received 600,000 calls. loveLife sponsored 350 community Born Free Dialogues¹ that reached more than 10,000 people. It also had a

¹ Born Free Dialogue aimed to spark discussion between youths and parents about topics, including sex, healthy sexuality, HIV prevention, and other sensitive issues affecting adolescents such as alcohol and drug abuse. loveLife GBs facilitated the discussions through role playing, games, storytelling, and other tools to stimulate discussion and action.

network of 500 goGogetters, who provided counseling and support services to orphaned and vulnerable youth.

To improve its tracking of all these programs, loveLife centralized its monitoring system in 2008. GBs collected data on triplicate forms. One copy stayed at the regional and provincial levels each, and one was sent to data entry specialists at the national office who entered all the data into the online system. The new system included several quality assurance checks and improved reporting performance. Between 2007 and 2008, the system captured a 122% increase in loveLife program participants, which managers attributed to the monitoring system improvements.

Results

loveLife had always intended to repeat its 2003 national youth HIV prevalence survey¹ but never had sufficient funding to do so. A different national HIV prevalence survey was completed in 2002, 2006, and 2008, however. While it did not collect the data necessary to draw firm conclusions about loveLife's impact, it showed encouraging trends in declining youth HIV prevalence and incidence that loveLife managers used as a proxy measurement.

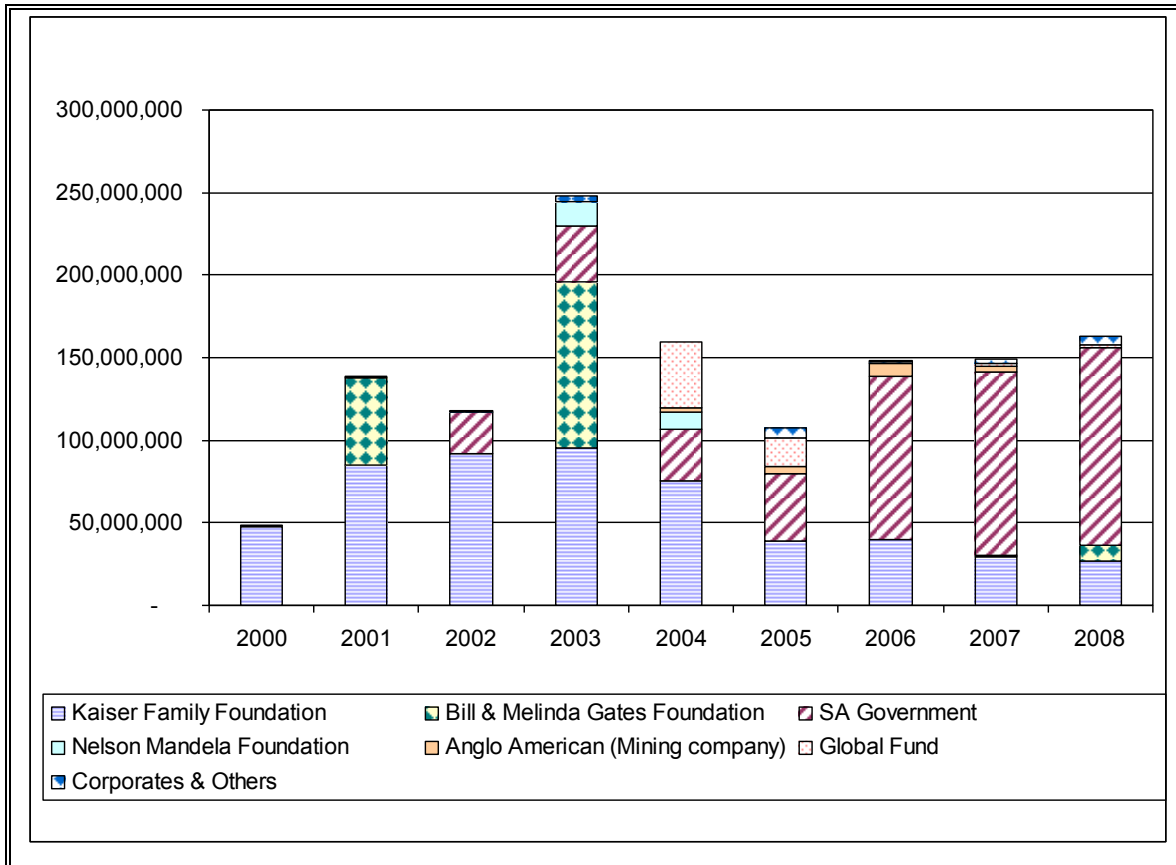
In 2008 loveLife was the most well-known of South Africa's large communication campaigns, reaching 79% of youth (15-24) and 71% of adults (25-49).² Nationally, self-reported condom use had increased significantly between 2002 and 2008 for all age groups but especially for ages 15 to 24. In 2008, 87% of young men and 73% of females reported using condoms, up from 57% and 46%, respectively, in 2002.² That year youth HIV prevalence appeared to flat line, and estimated incidence² among 15- to 24-year-old women fell by more than half between 2005 and 2008³ (see **Exhibit 2** for chart on youth incidence). The survey showed no change in youths reporting multiple, concurrent sexual partnerships; the median age of first sexual intercourse (50% had sex at age 17); or patterns of age-disparate sex (a quarter of 15- to 19-year-old-women reported having a sexual partner at least five years older).

A loveLife-commissioned survey of former GBs found that the program had a positive impact on their lives. They were more likely to be employed than their peer group (60% vs. 36%) and more likely to have some post-secondary school education (50% vs. 6%).⁴

In April 2009 Grace Matlhabe transitioned into the role of loveLife's CEO. At the same time, South Africa's new President Jacob Zuma began ushering in a new government more responsive to HIV/AIDS issues. More than 80% of loveLife's budget now came from the government. As Kaiser's support for loveLife wound down, in 2008 it supported a long-term strategic planning process to help loveLife position itself beyond 2010.

² Youth incidence estimates were derived mathematically using prevalence data by single year of age and assuming that HIV prevalence differences between the age strata represent incident HIV infections. This method is not applicable in older age groups, when AIDS-related mortality has a major impact on HIV prevalence levels.

Exhibit 1 *loveLife Revenue by Source, 2000 – 2008 (SA Rand)*



Source: loveLife audited financial statements.

Exhibit 2 *HIV Incidence among 15-20-year-old South Africans, 2002-2008*

	2002 - 2005	2005 - 2008
Women	5.5 (4.3-6.6)	2.2 (1.3-3.1)
Men	0.5 (0.1 - 1.1)	0.8 (0.4 - 1.4)

Source: Rehle T, Hallett T, Shisana O, et al. A Decline in New HIV Infections in South Africa: Estimating HIV Incidence from Three National HIV Surveys in 2002, 2005 and 2008. *PLoS one*. 2010;5(6):e11094.

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