A call to action for anti-colonial funding of HIV programs in sub-Saharan Africa

Across sub-Saharan Africa, community-led organizations (CLOs) reach the most marginalized community members and provide diversified programming and care that responds to people’s unique needs. Investing in these organizations and their expressed priorities is key to ending the AIDS pandemic as a public health threat by 2030.

Conventional models of philanthropy and international development, driven by organizations based in the Global North, devalue CLOs’ expertise and experience, and ignore the systemic racism and colonial influence embedded in top-down funding practices. This approach to funding undermines the value and impact of CLOs’ work.

We call on funders to commit to an ongoing process of organizational reflection and to take concrete steps toward decolonizing funding practices. Using the lens of these five anti-colonial funding principles, funding organizations can strengthen their support of community-led organizations and shift power into their hands.
Expand traditional approaches to demonstrating impact in community-based health initiatives and ease the burden of reporting.

Respect the agency and expertise of community-led organizations (CLOs) by responding directly to their needs and priorities; implementing co-decision-making processes; and providing flexible, context-specific funding.

Provide multi-year grants as part of long-term investment in the people, infrastructure, and growth of community-led organizations.

Expand traditional approaches to demonstrating impact in community-based health initiatives and ease the burden of reporting.

Streamline application processes or support intermediary funders who have existing close relationships with CLOs and work in anti-colonial ways.

Build partnerships with CLOs that extend beyond funding to include peer learning and advocacy.

Visit stephenlewisfoundation.org/investing-in-healing-health-and-hope to read a more in depth look at these funding principles through the lens of community-based care.