

**Crossover
Programmatic
Collaboration
Between HIV/AIDS
Key Populations
NGOs: A Case Study
of the Netherlands
Funded “Bridging the
Gaps – Health and
Rights for Key
Populations” Global
Alliance**

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BRIDGING THE GAPS

Health and rights for key populations

- Crossover collaboration between HIV/AIDS Key Population organizations and global and local partners, in order to more effectively contribute to health and rights for Key Populations.

Key Populations

- LGBTI
- People who use Drugs (PUD)
- Sex Workers (SW)

Partner levels

- Alliance
- Global
- In-Country

Methods



■ Qualitative methods

Multi-sited ethnography in Amsterdam, Kyrgyzstan*, and Kenya*, as well as international events (Partner Forum and OR workshops).

*Field sites selected due to presence of all 3 KPs in both; one well-documented, the other under-represented in research. Analysis of what facilitated this.

Data collection methods: qualitative interviewing, focus groups discussions, ongoing participant observation at BtG lead agency and PT activities.

■ Quantitative methods

Social Network Analysis and end-of-project survey, targeting all partner organisations in the BtG network.

Social Network Analysis

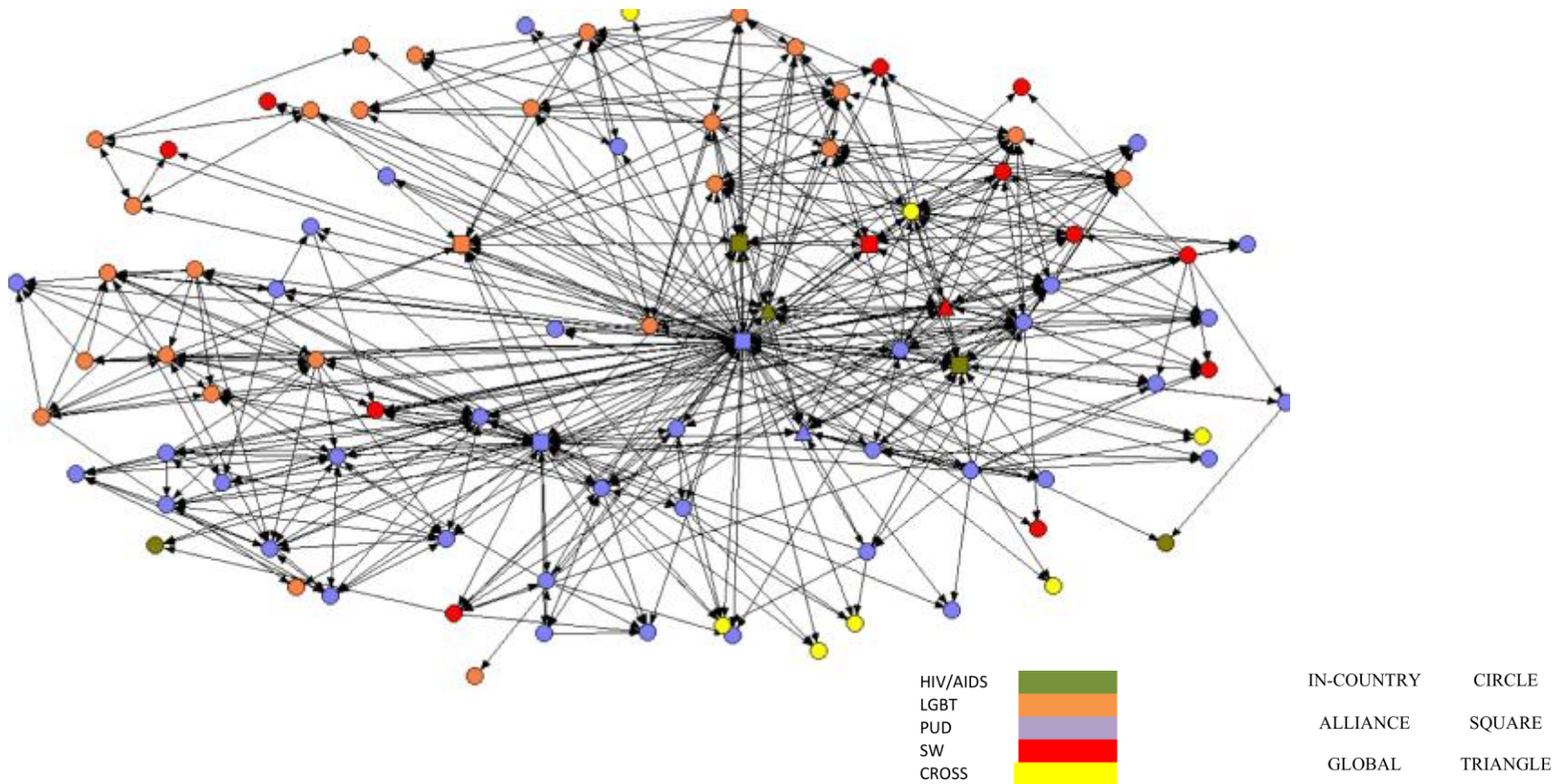


- Mapping of relations
- Testing what creates clusters
- Testing why relations change
- Finding the key players

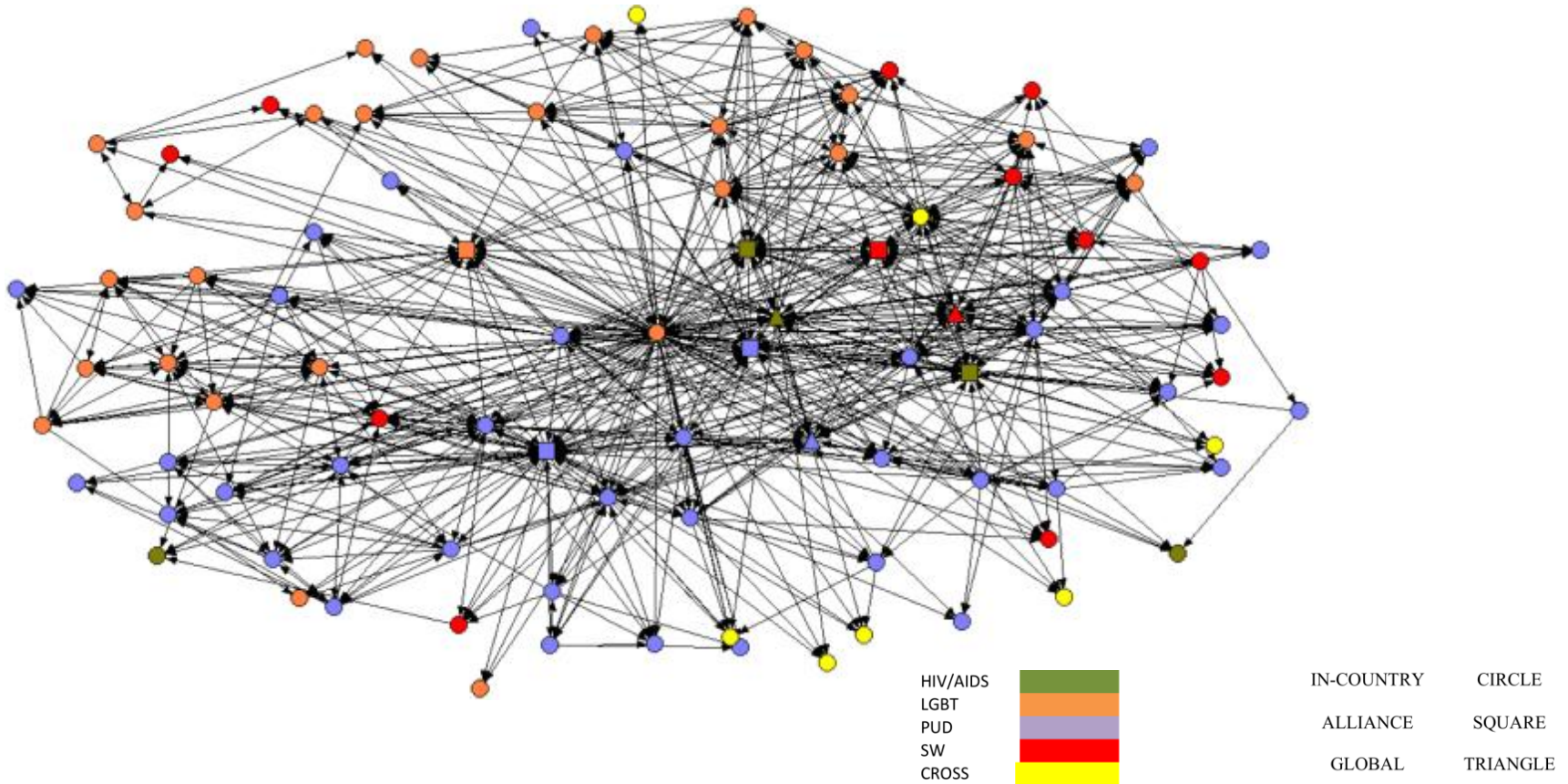
Collaboration on a scale of 3:

- Contact
- Sharing of knowledge and practices
- Creating something together

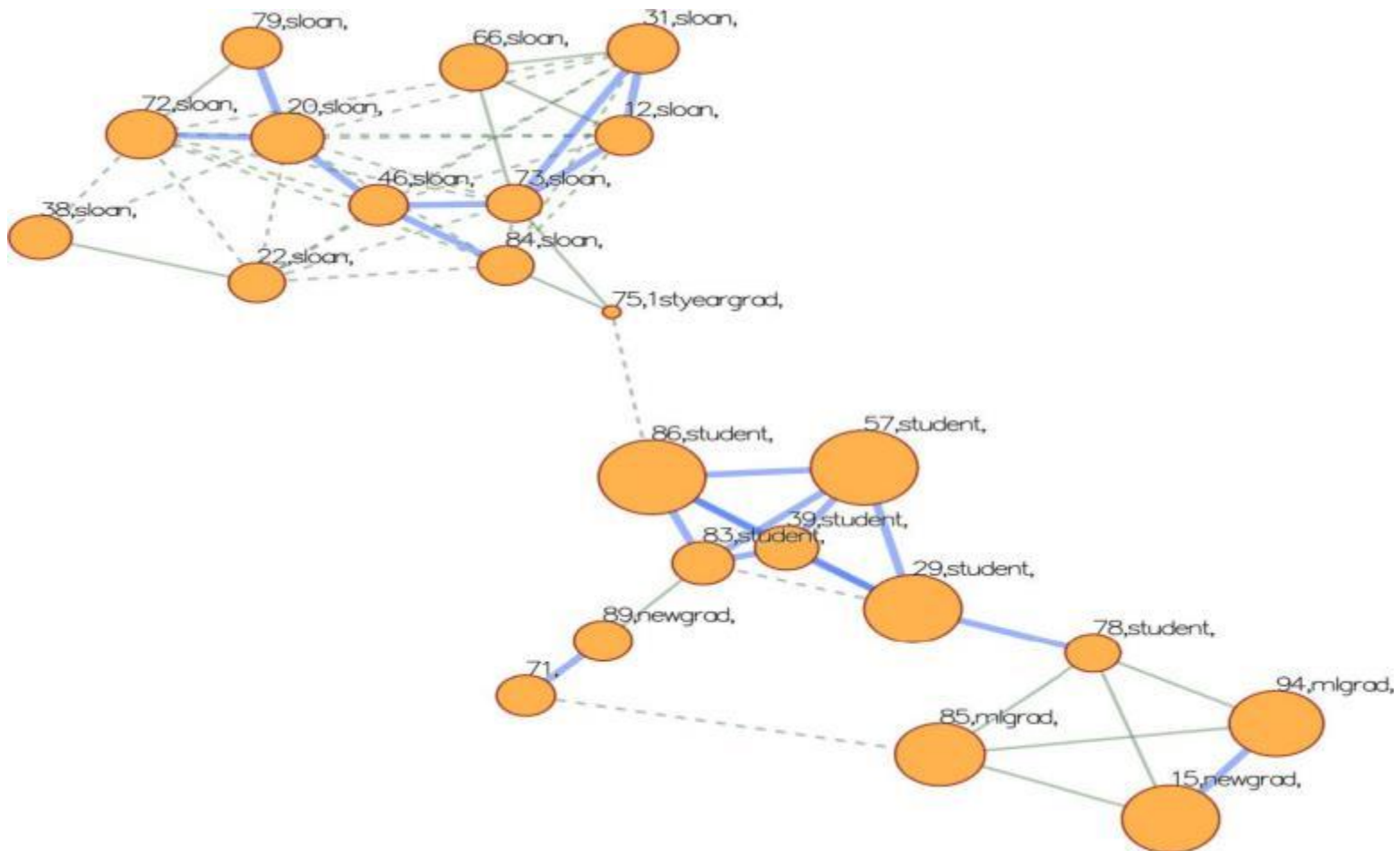
Quantitative findings: Network Before BtG



Quantitative findings: Network Now



Social Network Analysis 101: Centrality



The Network of Bridging the Gaps



- Substantial non-random increase of collaboration ties
- Increase varies over groups
- Segregation along different factors
- Different central actors

Cross-cutting issues: collaboration across KPs



- Motivators: **Intersectionality:**

"I think there is a reason to [collaborate]. Why? Because there is interrelation between the KPs. I can be a sex worker, an injecting drug user, and LGBT at the same time." (KII, Local partner, Kenya)

AND: **common ground between KPs:**

"Because the similarity of stigma discrimination, of marginalization of our communities is common," (KII, Global partner)

- **Barrier:** KPs working *"in silos"*, **intentionally** (protectionism of own group, within a discourse of identity politics) or **unintentionally** (lack of awareness of others' work)
- **Facilitator: Difference** clearly defines roles and decreases competition (unlike other collaborations, e.g. within KP project)

Cross-cutting issues: collaboration with global partners



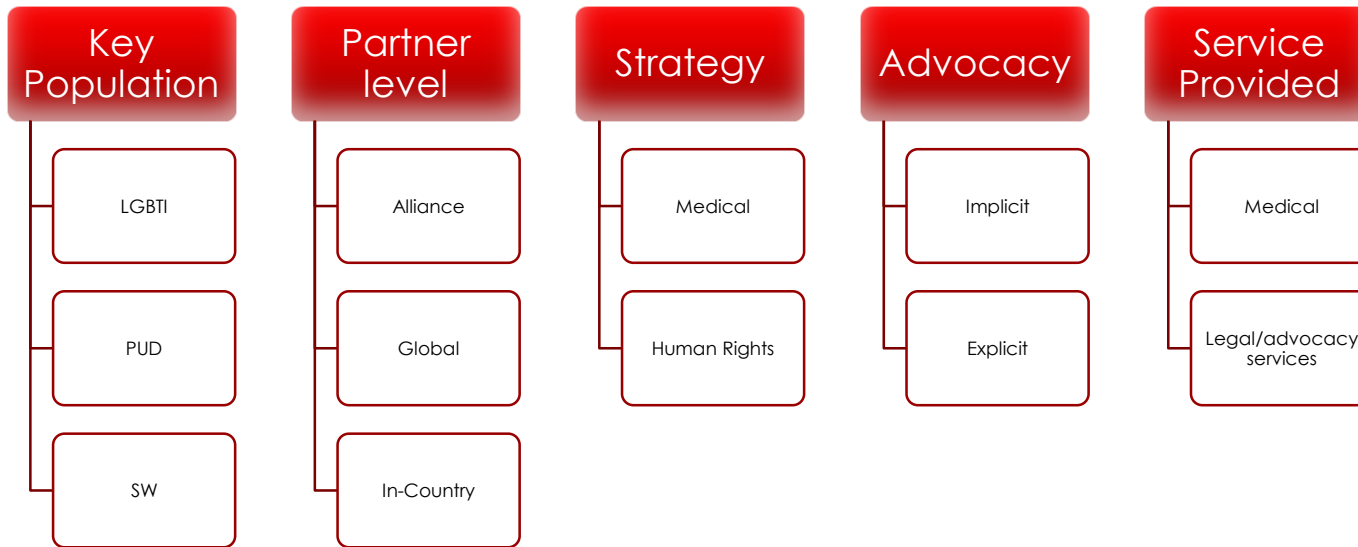
- Motivator: **donor commitments** and strategic planning
- Barrier: Challenging **roles and responsibilities** within KP projects (lack of recognition of added value, particularly of Globals)
- Barrier: Agreeing upon issues of **representation** (disagreement between Dutch alliance and Global partners, not locals)
- Facilitator: “**Agreeing to disagree**”: addressing issues, rather than organizational ideology

Organisational identities: *“Wearing different hats”*

“Sometimes partners at all levels within BtG have struggled to understand the multiple hats that [we] wear. So that’s been a challenge.” (KII, global partner)

“There’s been persistent, repetitive questioning of ‘what do you do? What’s your added value? Why can’t we do advocacy?’” (KII, global partner)

The Bridging the Gaps Alliance



Conclusions and Recommendations



- The importance of the actual mapping out of relations
- Huge diversity, between and within KP projects.
- Importance of pinpointing the exact dimension or level wherein the discussion takes place.

Quantitative findings: Future Network

