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Upfront

Cultivating Cross-Sector Partnerships **An HIV organization in Botswana provides lessons in cooperation** By Alana Conner Snibbe

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Cultivating Cross-Sector Partnerships

An HIV organization in Botswana provides lessons in cooperation

With the addition of Warren Buffett's bequest, the Bill & Melinda Gates Foundation's assets will be greater than the GDPs of most sovereign nations. And so the question of how nonprofits and governments, as well as corporations, can more effectively partner to solve the world's problems is all the more salient. A case study of one such cross-sector venture, African Comprehensive HIV/AIDS Partnerships (ACHAP), reveals that success

comes only after partners learn each other's values and build trusting relationships.

These things take time and patience, though, says Michael R. Reich, the Taro Takemi Professor of International Health Policy at the Harvard School of Public Health. Reich and Ilavenil Ramiah, of the Harvard Center for Population and Development Studies, are co-authors of the case study, which appears in *Social Science and Medicine* (vol. 63,

no. 2). Reich and Ramiah base their conclusions on more than 60 interviews with political leaders, civil servants, executives, and program officers in Botswana and the United States, as well as on published and unpublished documents.

ACHAP was established in 2001 as a partnership between the Gates Foundation, Merck & Co., and the government of Botswana to provide a wide range of programs, including antiretroviral distribution, centers



An ACHAP worker promotes condom use in Gabarone, Botswana. ACHAP is a cross-sector partnership between the Gates Foundation, Merck, and the government of Botswana to treat and prevent HIV/AIDS.

for people living with HIV/AIDS, and condom marketing. The Gates Foundation and Merck each contributed \$50 million to the project. Due in part to ACHAP, Botswana

now has more people taking anti-retrovirals than does any other country in sub-Saharan Africa. It is also the only African country to provide free HIV/AIDS treatment to everyone.

Despite its successes, ACHAP's early days were not auspicious. Although the government of Botswana valued private-sector assertiveness and efficiency, it felt that its wealthy partners overstepped their boundaries. For example, the U.S. partners overruled the government's proposal to use ACHAP funds to build medical waste disposal systems – an act that remained “deeply etched in the memories of government officials,” the authors write. ACHAP also enlisted other NGOs to take on problems that the government thought it was more fit to address. Overall, the Botswanan government found ACHAP's director, a physician of Dutch origin,

“abrasive” by their culture’s standards, according to the study.

Over the next few years, however, ACHAP learned to accommodate the Botswanan government’s culture of consultation and consensus building. The partners also learned that Botswana’s colonial experiences have left its people “wary of foreigners who do not show an appreciation of local values and ways,” the authors write. Reflecting this learning, ACHAP appointed Tsetsele Fantan, a highly regarded Botswanan woman, to be its director in 2004.

Reich and Ramiah identified several other lessons for public-private partnerships. Noting that ACHAP leaders initially reached out to only the highest echelons of their organizations, the authors surmise that operations smoothed only after the partner organizations built relationships that cut across hierarchies. When success did come, it was after several years, and so the authors recommend that public-private collaborators think of their partnership as a process, rather than a product. Partners should also expect a lot of stress.

“Successful organizations go through a learning process,” concludes Reich. “And they become successful because they learn that they need to build trust.” –A.C.S.

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