

Type II Partnership Proposal presented by the French Government

TITLE: Network for Therapeutic Solidarity in Hospitals (ESTHER - *Ensemble pour une Solidarité Thérapeutique Hospitalière en Réseau*)

PARTNERS:

Sponsors of the initiative (complete contact information):

GIP ESTHER, France

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Partners: France, Italy, Luxembourg, and Spain, as the European network, with their partner countries in the initiative, in Africa, Asia, Latin America and the Caribbean.

Associated participants: WHO and UNAIDS for consultation and plea support, Hospitals and NGOs from northern and southern countries.

DESCRIPTION:

A brief description and connection with Agenda 21 or the Millennium Declaration:

To improve access to quality treatment for people living with HIV and AIDS in developing countries, by increasing the means of access to care and treatment and a complete health care offer combining social and community aspects over a three-year cycle.

The aim is to identify the health care facilities in developing countries, which, with the help of twinning with a European hospital facility, can reinforce their expertise and equipment. These facilities are becoming the focal points for networks including medical and biological monitoring services, associations and NGOs, representing the civil partnership and other organizations involved in the field.

More specifically, ESTHER should enable:

- Strengthening of health care services (hospital and out-patient facilities) geared towards combating AIDS;
- Establishment of a suitable technical platform with good maintenance;
- Participation by users of the health care system and by associations of those affected;
- Implementation and/or consolidation of networks between partners – NGOs, associations and representatives of the civil partnership – in order to provide psychosocial support in a multidisciplinary and community approach.

This balanced partnership will be built around existing structures, with commitments in the form of decentralized cooperation and active pursuit of ways to prolong these strategies beyond the three years of the partnership.

This project is linked to chapters 3 (fighting poverty) and 6 (protection and promotion of human health: control of communicable diseases, protecting vulnerable groups) of Agenda 21.

Three elements are similar:

- to mobilize countries
- to unite in the fight against AIDS
- to reduce the social and economic consequences of AIDS on society

Expected results:

Thanks to these partnerships and synergies between professionals in northern and southern countries, and based on human potential, **ESTHER is intended to be a tool to help structure the long-term provision of health care in the south, enabling patients to benefit from quality treatment, adapted to the health context of their country.**

Beyond these partnerships between countries, facilities and professionals, this international public health initiative aims in the long run at considerably improving the health care systems in developing countries, **a prerequisite for sustainable human, social and economic development.**

Quantitatively, France is currently working with ten developing countries, associating about fifty hospitals over a three-year period (Senegal, Mali, Burkina Faso, Benin, Gabon, Cameroon, Ivory Coast, Morocco, Vietnam and Cambodia). Extension to ten other countries is planned for 2003.

Two hospitals in Luxembourg are collaborating with two hospitals in Rwanda. Three other countries are planned for 2003-2004. Italy is working with some West and East African countries.

Spain is more oriented towards Latin and Central America. It is currently working with a hospital in Quito (Republic of **Ecuador**) and another in Guatemala. An extension is planned to ten hospitals in three other countries in Central America and three countries in south America.

Furthermore, results indicators are currently being finalized in consultation with the facilities involved from the north and the south. Using objective data, the aim is to determine:

- the number of rehabilitated facilities and the number of technical platforms made operational;
- the number of training courses carried out and the number of beneficiaries;
- the number of patients treated.

Qualitative data will make it possible to analyze the following:

- strengthening of health care systems through their health care facilities, and enrichment of human capabilities to permit the continuation of these actions;
- networking of health care services with the civil partnership;
- implementation of the mechanisms to prolong the actions and protocols;
- verifiable assurances of access to treatments;
- a reduction of human suffering and a slow-down in the future repercussions of HIV infection with a view to human development and poverty reduction.

The ESTHER project is focused on a direct partnership approach between hospital teams in the north and hospitals and health facilities in the developing countries. These partnerships fall within the framework of administrative agreements signed by the Ministries in the north and the south. The civil partnership through its NGOs and HIV patient associations as well as territorial governments are actively involved in the whole process, from design to implementation of the initiative.

The ESTHER project includes medical, psychosocial and community services. Training courses have been organized, the technical platforms are equipped, the development of treatment and monitoring protocols have been adapted to the realities, mediators have been trained to support and inform the beneficiary community, and drugs have been supplied, waiting for a stable source of funding (identified at the start of the partnership) to take effect.

Those involved are:

- Hospital teams with proven experience of the patient, his biological and clinical surveillance and coordination with out-patient treatment. The hospital is the centre of expertise for access to treatments so as to avoid the risks of therapeutic failure and resistance. Long-standing relationships between medical teams in the north and the south should facilitate progress and transfers of know-how and technologies.
- Associations are actively involved in programs that will help relations between sufferers and caregivers as well as develop mediation actions between health training and communities. They will promote access to ARV's, adherence to and observance of treatments and the dissemination of information to populations to ensure social acceptance.

ESTIMATED TIMETABLE:

Project start: 2002

Conclusion: 2005

PLANNED RESOURCES:

The participating governments are funding the initiative; funding of the partnerships also includes suitable contributions from the hospitals (in the north and the south) and the partners involved in the projects. Selective support from the WHO, UNAIDS, and the World Bank is currently under investigation. Linking with the Global Fund to Fight AIDS, Tuberculosis and Malaria is also being explored.

Coordination mechanisms:

Coordination is at the heart of the ESTHER initiative. It is characterized by the implementation of structures that will permit its realization:

At the international level:

- Establishment of the European ESTHER network, including France, Luxembourg, Italy and Spain;
- Establishment of the International Advisory Council (IAC): coordination structure to ensure coherence of the initiative, a platform for exchanging experience.

At the national level: each country involved in the ESTHER initiative is responsible for organizing its twinning.

In France, to supervise and monitor implementation of the initiative, and make it as effective as possible, a specific structure has been created: the "Network for Therapeutic Solidarity in Hospitals" Public Interest Group (GIP ESTHER). It is the instrument for intervention with both developing countries and partner health care establishments and with countries in the north. Relying on French hospital and association networks, for the moment it is involved with nineteen developing countries and around forty French health care establishments. It helps in defining the strategy and coordinates cooperation between France and the chosen partner countries. It carries bilateral projects and handles secretarial work for the International Advisory Committee (IAC) in Paris.

Luxembourg, Italy and Spain have included this initiative as an additional project in their traditional activities of cooperation and development.

Training courses:

National and sub-regional training courses for partnership members (clinical, biological, virological, social and community), exchange of experts (visits to European countries), technology transfers, training in management of programmes, health structures and pharmacies; training in monitoring and assessment.

Evaluation process:

At the local level: regular monitoring of steps by an oversight committee including representatives from beneficiary countries and backers;

Within the GIP ESTHER: training and process evaluation;

Within ESTHER member countries: evaluation of results and impact after two years in operation.

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Additional information is available on the web site: www.diplomatie.fr