

# Impact of Community Engagement Advocacy Work on Quality Person Centered HIV Services

## *A Case Study from Sierra Leone*

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# Case Study Highlights

1. Aim & Objective of the Engagement
2. Resources Used (Human, Funds, Materials)
3. Engagement Activities
4. Outcomes from the Engagement
5. Challenges & Overall Reflections
6. Key messages

# Aim & Objective of the Engagement

- To improve meaningful engagement of people living with HIV in DSD policy development, program design, planning, implementation, monitoring, and evaluation
- To sustain strong and meaningful community engagement

# CE Tool Result for Sierra Leone 2022 and 2023 - 1

Average Country Score 2023

INDICATORS (2023)	2022	2023
% of TWG and task team meetings on DSD where RoC/community members participated during the reporting period		
% of policy validation exercises where RoC/community members participated		
% of online DSD TWG and task team platforms that include RoC/community members		
% of DSD-related M&E meetings that include RoC/community members		
% of DSD impact assessment/evaluations where RoC/community members participated		
% of meetings focused on DSD programme design where RoC/community members participated		
% of DSD planning meetings where RoC/community members provided recommendations on prioritization of DSD models		
% of DSD health facility trainings that include RoC/community members as planners, facilitators and participants		
% of DSD M&E tools development meetings where RoC/community members participated		
% of DSD supportive supervision visits that include RoC/community members		

# CE Tool Result for Sierra Leone 2022 and 2023 - 2

Average Country Score 2023

INDICATORS (2023)	2022	2023
% of CQUIN Capability Maturity Model self-assessments conducted by MoH where RoC/community members participated and led on community engagement domain		
% of thematic working group meetings where RoC/community members presented		
% of DSD sensitization/demand creation activities led by or actively involving RoC/community members		
% of health facilities with DSD where RoC work as service providers		
% of health facilities offering DSD services where community score cards and/or RoC satisfaction surveys are implemented		
% of government-developed DSD policy communication materials that acknowledged input from national networks of PLHIV		
% of peer educators who attended health education learning sessions		
% of RoC/community members who attended health education learning sessions		

# Resources used (Human, Funds, Materials)

- **Human Resources** - Data Collectors (Recipients of Care and Key Populations)
- **Meeting cost**
  - Refreshment
  - Transport refund
- **Stipend** - Data Collectors
- **Administrative cost**
- **Total funds - \$5,495**

# Engagement Activities

- **Data collection** - Collected data on DSD in health facilities (Western Area Rural, Western Area Urban, Bo, Kenema and Makeni)
- **Meetings**
  - Organized dialogue with Recipients of Care
  - Organized dialogue with Key Populations (KP)
  - Organized dialogue with Health Care Workers

# Approach/Method

## ▪Coverage:

REGION	DISRICT	HEALTH FACILITY
WESTERN REGION	Western Area Urban & Rural	20
NORTHERN REGION	Bombali	10
SOUTHERN REGION	Bo	10
EASTERN REGION	Kenema	10
TOTAL		30

▪**Tool:** A questionnaire was developed and administered using Kobo collect

## ▪Respondents

- ✓ Number of Recipients of Care: 500
- ✓ Number of Healthcare Workers: 50
- ✓ How were selected: Purposive sampling

▪**Data collectors:** NETHIPS Members



## Engagement Activities - contd.

- **Advocacy** - Organized advocacy meetings by bringing together a diverse range of stakeholders, including government officials, healthcare providers, civil society organizations, and representatives from Recipients of Care and Key Populations.
  - The objective was on **integrating HIV services into the healthcare** delivery system.
  - It focused on **quality service delivery for Recipients of Care** and how these services will be monitored by the users of the services.
- We also looked at the **role Recipients of Care play in Differentiated Service Delivery** especially in the health facilities.

## Engagement Activities: Integration of non-HIV services into HIV services

- HIV continues to be a vertical program, and this has affected the quality of services rendered to RoC as they must access other non-HIV health services at a different service delivery point.
  - This is also partly responsible for stigmatization in the healthcare delivery system
- RoC will continue to collect data on HIV service integration through Community-Led Monitoring and community engagement.
- NETHIPS will continue to advocate for access to comprehensive health services for RoC and integration of HIV into the healthcare delivery system

# Outcomes from the Engagement

- Advocacy for the rights and needs of RoC and other marginalized populations, has contributed to the development of policies that are more responsive to the unique challenges of these populations.
  - National Community-Led Monitoring (CLM) Guideline;
  - CLM Roadmap, and
  - Harmonized National CLM indicators framework

# Outcomes from the Engagement

- Dialogue with Health Care Workers emphasizes the importance of confidentiality, empathy, respect, and persons-centered care resulting in improved interactions between healthcare workers and RoCs resulting leading to a more supportive and understanding environment.
- RoCs are now more likely to engage in treatment, adhere to their regimens, and seek necessary medical support, ultimately improving health outcomes.

## Outcomes from the Engagement - contd.

- NETHIPS was approved to implement CLM nationwide by the two donors that fund CLM in Sierra Leone (Global Fund and PEPFAR)
- 150 Expert clients and 180 Peer Educators to support treatment adherence and retention in care were approved (through GC-7 grant) to meaningfully participate in delivering care in 7 districts

## Outcomes from the Engagement - contd.

- As a result of sustained advocacy, ARVs are now provided at Drop-in-Centers (DIC) manned by KPs. This is a result of over two years advocacy to roll out DSD.

# Challenges & Overall Reflections

- Competing national and organizational priorities, resulted in some partners not attending the Community Engagement Advocacy meetings
- Deep-rooted stigma associated with HIV in Sierra Leone.
  - This stigma often deters individuals from openly participating in community engagement activities.

# Challenges & Overall Reflections - contd.

- Resource constraints significantly hinder the operational capabilities of NETHIPS.
  - Limited financial support affected our ability to conduct comprehensive assessment of all the health facilities where RoC provide DSD services thereby undermining the effectiveness of these engagement initiatives.



# Challenges & Overall Reflections

- There is need for tailored, context-specific engagement strategies
- Additionally, to combat stigma and secure necessary resources, it is important to sustain advocacy.
- Embracing these lessons will be crucial in not only enhancing service delivery for Recipients of Care and Key Populations but also in fostering a more inclusive and supportive healthcare landscape in Sierra Leone.

# Key Messages

- Governments and donors must recognize that effective interventions are grounded in the lived experiences of those infected and affected by HIV & TB. By funding CSOs, stakeholders will enable the development of tailored services that effectively address the unique needs of diverse populations.
- Government and donors must allocate resources to comprehensive Community Engagement strategies that promote linkage to care, adherence, and retention in treatment. By investing in these initiatives, the overall health outcomes of Recipients of Care can be significantly improved.

# Key Messages

- We can create a more inclusive and effective healthcare landscape that significantly improves health outcomes for all by prioritizing community involvement, fostering trust, and building local capacity of CSOs,

# Data Collection Exercise from a RoC



# Collecting Data from Health Care Worker



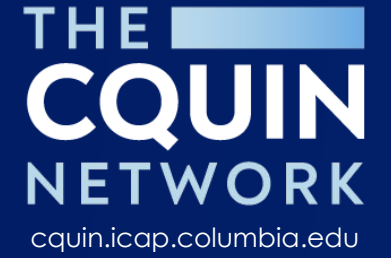


# Dialogue Meeting With Recipients of Care



# Dialogue Meeting With Health Care Workers





Thank You!

