

# ACHIEVING MORE WITH LESS: HOW PACTE-VIH LEVERAGED IMPACTS

Third Regional KP meeting, Yaoundé, Cameroon, September 2016

"Give me a lever long enough and a fulcrum on which to place it, and I shall move the world," -- **Archimedes**

## I. Leveraging partnerships to achieve more

PACTE-VIH in alignment with USAID/WA vision, places central focus on developing methods to leverage the impacts of its interventions and take best practices to scale. An important example of leveraging was the development of regional key populations (KP) meetings, which started in 2014 in Ghana. Their focus is on braid knowledge-sharing and leveraging opportunities for programs targeting KP, mostly about men who have sex with men (MSM) and female sex workers (FSW).

The efficacy of this approach was demonstrated by the success of the Third Regional KP meeting held in Yaoundé, Cameroon on September 20-22, 2016. Its theme placed a spotlight on the urgent needs of KP in West and Central Africa: "Leaving no one behind; Bringing Key Population programs in West and Central Africa to scale to meet the 90-90-90 UNAIDS targets".

It drew 250 participants from 30 countries, including 25 African countries. It brought together almost all hands-on actors, including KP leaders, government decision-takers, service providers, international funding agencies, and key regional implementing non-governmental organizations like PACTE-VIH. The first two meetings in Accra in 2014 and Lomé in 2015 proved to be effective building blocks for the Yaoundé meeting, which established KP at the center of HIV prevention efforts.

The common threads for partners were the 90-90-90 UNAIDS targets, under which 90% of people living with HIV worldwide should be diagnosed, 90% should be under treatment and 90% should be virally suppressed by 2020. Thus, 73% of all people living with HIV

worldwide would be virally suppressed and the AIDS epidemic would end by 2030.

This was the first time that such a large community of people working on issues impacting directly the health of KP shared knowledge and best practices for dealing with their specific challenges. The progression of participants from 80 in Accra and 130 in Lomé to 250 in Yaoundé was notable, including the presence of ministers and officials from West and Central Africa. The increasing participation of KP was remarkable since they had long avoided loss of anonymity for fear of stigma, segregation and criminalization.

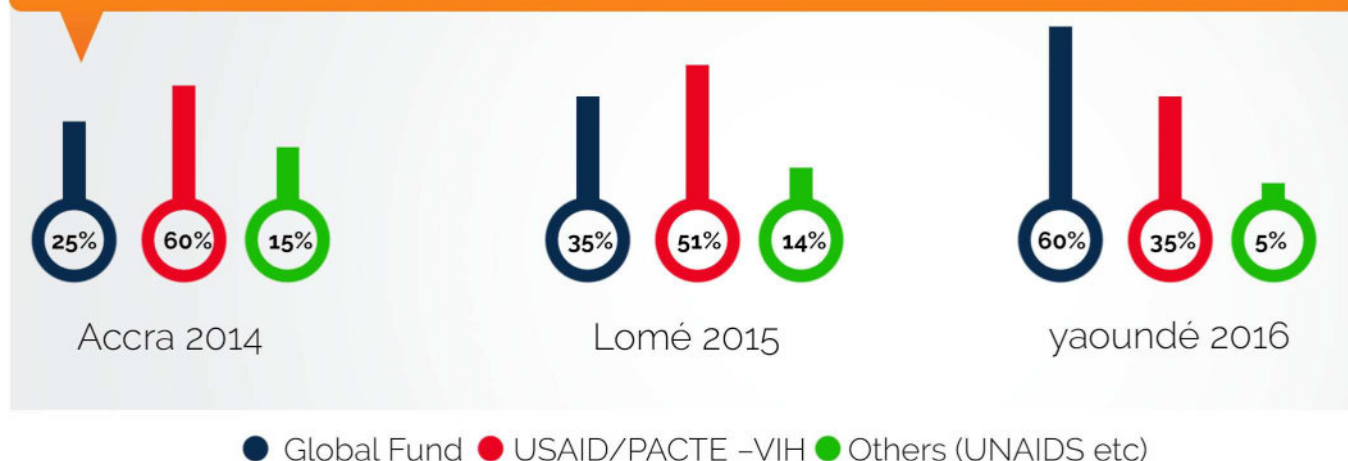
In addition, PACTE-VIH/USAID could successfully achieve a high level of leveraging. Interestingly, it contributed only about one-third of total costs, which was significantly down from 60% in 2014 and 51% in 2015. This illustrates the efficacy of a carefully structured platform for obtaining leverage from other key players, including funding agencies, because each obtains something of value from it.

This success was driven partly by PACTE-VIH efforts to provide (a) technical collaboration with partners to prepare the regional meetings and (b) technical assistance to participants to prepare their presentations.

PACTE-VIH is a key member of the Regional Platform on KPs established in March 2015 to bring together all partners in West and Central Africa to fast-track responses. The goals include achieving 75% reduction in HIV new infections by 2020 towards ending AIDS by 2030.

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Figure 1: Cost-sharing for Regional KP meetings



## II. Placing KP at center-stage

The value added by PACTE-VIH leadership included emergence of clear consent that stigma, discrimination, violence and other human rights violations against KP deserve center-stage in HIV prevention. All actors whether government, Non Governmental Organizations (NGO) or institutional agreed to collaborate to improve performance and leverage outcomes in their respective localities and areas of competence.

Importantly, there was recognition that putting focus on KP is a public health imperative and, as such, a vital component of HIV prevention. That is because fear of social censure prevents KP from using health services or getting the information and counselling necessary for their own health and that of others.

Using the regional KP meetings as fulcrum points to

leverage the effectiveness of each stakeholder is worthwhile because it helps to strengthen small local actors while also giving larger programs like PACTE-VIH and funding agencies opportunities to receive feedback and select relevant partners.

PACTE-VIH is committed to targeted interventions that are evidence-based, adaptable, replicable and transferrable across the West African region. Important strides have been made since the five-year PACTE-VIH project (2012-2017) began providing support for government efforts in Togo, Burkina Faso, and other West African countries. It addresses critical gaps in KP programming by strategically targeting interventions that build political will and resources to engage key stakeholders.

## III. PACTE-VIH strategy for working together to support 90-90-90

For PACTE-VIH, leveraging means creating partnerships with agencies providing funds or other resources to increase the impacts of everyone's work

in protecting KP and increasing their use of health services. It also means joint technical collaboration for advocacy and technical assistance in the region.





Recognizing the importance of groundwork and planning for successful outcomes, PACTE-VIH prepared the following:

- Terms of reference for the Yaoundé meeting to draw the attention of:
  - o Major funding agencies;
  - o Local partners in Togo, Burkina Faso and other countries with the PACTE-VIH mandate;
  - o Other smaller partners who could provide financial contributions or other resources; and
  - o Local groups conducting interventions in favor of KP in their areas.
- A comprehensive budget that allowed agencies like the Global Fund, USAID, UNAIDS, World Bank, ALCO (Abidjan-Lagos Corridor Organization) and others to take appropriate funding decisions. It also provided

necessary information for partners, who preferred to provide support only for specific activities at Yaoundé.

- Opportunities for private sector partners, including companies, to make presentations at Yaoundé. Some helped to pay for materials e.g. facsimile facilities. In addition to reinforcing PACTE-VIH programs, preparations for Yaoundé provided space for discussing broader issues, like:
  - o The needs for creative and strategic investments based on the latest evidence and best practices.
  - o Focus on the impact of HIV programs on KP and others, like adolescent girls and young women, who are highly vulnerable to HIV infection.
  - o Promote accountability and transparency to prepare governments to increase domestic HIV funding and increase their leadership in managing their country HIV programs.

## IV. PACTE-VIH technical collaboration and technical assistance

An innovative aspect of PACTE-VIH's leveraging through technical collaboration was participation in the new Regional Platform on Key Populations. Its members are representatives from West African Health Organization (WAHO), organization of coordination for the fight against endemic diseases in central africa (OCEAC), National Aids Commission (NACs), UNAIDS, regional networks and national KP organizations, academia, independent experts, international funders ;World Bank, USAID, The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and other partners. Member organizations have a clear mandate to advance HIV prevention, care and treatment for KPs in West and Central Africa (WCA).

As a main partner in West Africa, PACTE-VIH provided

technical support for the Regional KP meetings including terms of reference, agenda, the content of plenary sessions and satellite sessions, and choice speakers and moderators. Johns Hopkins University (JHU) provided significant technical help to organize the all three Regional KP meetings.

The steering committee held several virtual conferences to coordinate the Platform's work. The commitment participants and the quality of their interventions provided key impetus for the success of the Regional meetings in Lomé and Yaoundé. Local partners in Cameroon also played central roles for the Yaoundé KP meeting with an effective synergy of



## V. Advantages for this partnership and leveraging

"Alone we can do so little, together we can do so much," said Helen Keller, the deaf-blind author and women's rights activist. This is the belief that drives PACTE-VIH efforts to use leveraging tools like the

Yaoundé meeting, which had very broad reach in West and Central Africa. It also attracted representatives from Europe, the United States and India.

Figure 2: Countries and number of delegates at the Third Regional KP meeting.



The Yaoundé meeting confirmed the importance of regional KP meetings, formalized since 2014, as one of the key international forums to discuss regional progress on the HIV response.

Prior to that, on April 10, 2015, the 15 countries of the Economic Community of West African States

(ECOWAS) signed the Dakar Declaration committing them to meet the HIV needs of key populations as a priority in their national HIV responses. It ensured access to health services and HIV treatment without stigma or discrimination and became the essential international instrument underpinning regional KP meetings.



Following Yaoundé, regional KP meetings are now a solidly-established platform to share collective experience and knowledge to advance the HIV response in West and Central Africa. This platform includes a commitment from key partners of PACTE-VIH who attended these KP meetings to continue working together to leverage the comparative advantages of each to no longer leave behind KP in

achieving the 90/90/90 goals. The partners include the Global Fund, USAID, UNAIDS, WHO, the World Bank, civil society organizations, and regional partners. A major advantage is the growing transition of program funding from initiatives led mostly by international stakeholders to local, directly-owned, funded, and self-sustained platforms to deliver interventions and services.

PACTE-VIH also used the Yaoundé meeting to achieve other related purposes, such as:

Consolidating the political will of governments.

Consolidating the positive responses to its interventions to build alliances with media, police and others to protect KP against stigma-related violence.

Leadership to bring partners together to spread best practices and share resources, expertise and advocacy in the region.

Widely disseminate success stories to strengthen motivation of partners, especially KP. For instance, those who attended PACTE-VIH workshops changed their attitudes towards KP. They understood that HIV prevention is harder to achieve if KP are too fearful to take advantage of health services because of stigma and rejection.



## VI. Some KP priorities for partners at Yaoundé

A new regional priority for partners was the cascade framework of continuum of prevention care and treatment (CoPCT) for KP, which underlines the routes to healthy living with HIV and preventing new infections. Its eight steps emphasize the needs to:

There was need to ensure that Central Africa was not getting less attention than West Africa on KP issues in HIV prevention.

Stakeholders were concerned that KP have been neglected for too long due to stigmatization, discrimination and lack of resources.

KP learnt which local and other partners were best positioned to help them in their locations.

identify the KP; reach the KP; perform a test; diagnose persons living with HIV (PLHIV); enroll in care; initiate antiretroviral therapy (ART); sustain on ART; and suppress viral loads. Below are some of the outcomes and priorities:

There was significant agreement among stakeholders that KP should be the central concern, including MSM, FSW, people who inject drugs (PWID), transgender persons and incarcerated populations. They, among others, bear the highest burden of infection in the region.

PACTE-VIH leadership to unify stakeholder efforts was important because KP were left out of the global response to treatment due to stigmatization and lack of confidentiality in health units.

Regional partners discovered where to go to experience first-hand what KP groups were doing in their localities to secure their right to health and safety, and assist HIV prevention. That would help to improve their interventions.



## VII. Some comments of participants at Yaoundé



"When it comes to KP, partners tend to work in silos. It was amazing to see 250 participants from some 30 countries and 20 partners at Yaoundé. They really came together!" (-- Agency partner)

"KP, participants and partners came to know who was working where, on what, and what are the advantages – so that no one is left behind." (-- Agency partner)



"Yaoundé really gave voice to KP. That a young MSM would stand up in front of ministers and the media to have his say – that makes a powerful statement." (-- Agency partner)

"There is new momentum for handling KP issues as public health challenges. Yaoundé was an opportunity for international partners and others to communicate for what they stand and for what they don't. That helped to remove the hesitation of ministers and others who saw focus on KP for HIV prevention as indicating support for homosexuality. It was clear that this was a public health concern and did not endorse any sexual orientation." (-- Agency partner)



"Yaoundé was a learning and leveraging opportunity for partners of PACTE-VIH. These kinds of regional KP meetings should be made permanent. They offer platforms to share models of advocacy, improve the quality of communication, and develop partnerships tailored to specific intervention needs and locations."

"The Yaoundé meeting was very successful but may have grown too big. There may be need to rethink the workshop format, perhaps by splitting into more satellite sessions. It may be worth considering two meetings if interest continues to grow in Central Africa and West Africa." (-- Agency partner)



"Each partner used the Yaoundé meeting to leverage its own role by working with all actors and using its specialties. The role of PACTE-VIH in such meetings is very important. Funding partners look to it for the logistics etc. That is its comparative advantage." (-- Agency partner)

"As a sex worker, I am very overwhelmed because for the first time, I took part in such a conference with lots of sharing and beneficial orientations. I cannot openly declare my identity because the issue of sex workers remains a total taboo subject and people look at you as if you have killed someone." (--FSW)



"My impressions about this meeting are positive. Discussions are constructive and I wish that this initiative is sustained together with the implementation recommendations made in favor of KP." (-- MSM)

## VIII. Replicating this model of leverage

Below are some steps for a model of leverage, based on the experiences of PACTE-VIH:

### Step 01

PACTE-VIH maintained focus on KP needs when bringing stakeholders together to expand and replicate interventions across the region.

- A first step was to help KP leaders to feel secure about working with stakeholders to promote unified and coherent responses. Often MSM and FSW fear the loss of anonymity because it exposes them to rejection and violence in their neighborhoods.
- An effective way to encourage KP leadership was to ensure that issues contained in the Yaoundé agenda benefited KP directly, e.g. ending the social exclusion they suffer daily.

### Step 02

All stakeholders were involved from the start in decisions about the Yaoundé meeting agenda, to keep it focused on the actual needs of KP in their localities.

- A good way of ensuring unity was to establish prior agreement on common goals within the mandate of each stakeholder.
- Partners were invited for their hands-on work in the locations where KP suffered abuse from police and others. They were the most relevant for replicating best practices in their areas.
- Careful and purpose-oriented planning of the Yaoundé event helped to transform it into an effective platform for building networks, sharing expertise and explaining best practices.

### Step 03

PACTE-VIH carefully considered how to use available funding, expertise, innovations and influence to create changes beyond what it could achieve on its own.

- Optimizing financial, organizational and human resources was important because many partners work together and intervening with KP is person-oriented and very culturally sensitive.
- Focus was on scalable solutions that could multiply the positive impacts of interventions. From the start, PACTE-VIH has worked directly with KP to build upon small successes, one at a time. Relief brought to just one KP is a success that can be replicated many times.

### Step 04

PACTE-VIH provided technical assistance at all stages of preparations and during the Regional KP meetings, including such basic issues as:

- Assisting participants to prepare presentations and frame their points clearly.
- Reviewing their presentations and providing advice on content.



## Step 05

The important thing was to embrace the power of partnerships to transform conditions for KP.

- The three regional KP meetings were an innovation because they helped to consolidate the place of KP at the core of comprehensive services operated by governments and other partners.
- The regional meetings provided exceptional opportunities for profound experience-sharing through person-to-person encounters. They spread lessons learned throughout the West African region.
- There was unprecedented focus on KP, including efforts to provide support for their leadership in programs to reduce stigma, discrimination and violence against them.
- Efforts were leveraged through partnerships to train KP for leadership and help them to affirm their rights as citizens and persons. Focus was increased on empowering FSW to assert their rights with clients and boyfriends or gate keepers.

## IX. Regional KP meetings as leverage

The KP regional meeting format provides a useful model for leveraging the impacts of interventions and unifying stakeholders around common purposes.

The Third KP Regional meeting has confirmed the relevance of this model for bringing together all actors for clearly defined roles in helping to protect the human and health rights of KP, in the contexts of public health. Among

others, it would cater to the following needs:

- Bridge the gap between West and Central Africa about focus on KP.
- Continue to give voice to KP.
- Provide cooperation-sharing experiences among countries in the region.

## X. Looking towards the 2017 regional KP meeting

There was strong support for continuing regional KP meetings through next year and beyond. The following issues were emphasized for 2017:

- The needs for accurate mapping, including assessment of the “who, where and what” of risk behaviors and the availability of actors and support services.
- Differentiated models of care and how to measure stigma and discrimination to improve program design.
- Capacity-building for KP-led organizations and documenting successes to ensure lessons learned and their replication.
- Promoting understanding of KP human rights by KP communities and by media and wider society.

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The HIV & AIDS prevention and care project in West Africa (PACTE-VIH) is a five-year cooperative agreement (2012-2017) between USAID/West Africa and FHI360.

This document was made possible by the generous support of the American people through the United States of International Development (USAID). The contents are the responsibility of FHI360 and do not necessarily reflect the views of USAID or the United States Government.