

## Linking Policy to Programming (LPP)

# Strengthening Legal and Policy Environments for Reducing HIV Risk and Improving Sexual and Reproductive Health (SRH) for Young Key Populations in Southern Africa

## QUARTER FIVE CONSORTIUM REPORT

JANUARY – MARCH 2018



*Empowered lives.  
Resilient nations.*

## Intervention 1: LEA and National Action Planning

The focus for 2018 is to complete all the five National LEA reports and National Action Plans. All the countries have progressed significantly, following project inception and institutional strengthening. Most countries are either at data collection stage or drafting of the first report after the clearance of the inception reports by the National Steering Committee (NSC). The national LEA report will broadly cover areas relating to HIV, SRH, TB and Human Rights in the country; explore the domestication, implementation of International, Regional and National Human Rights frameworks; analyze laws and regulations with a focus on equality, anti-discrimination laws and access to justice; age of consent and access to SRH; analyse policies and national strategic plans; women, gender inequality, harmful gender norms and gender-based violence; youth policies and legislation; criminalization of key populations; employment; social welfare and access to services.

**Table one** summarizes the status of the LEAs in each country at the end of March 2018.

Country	Status of the LEA
Angola	The institutional arrangement (National Steering Committee) assigned to guide the LEA has been reconstituted as high-level government officials, including the State Minister of Education who served as chair of the committee, left their positions after the 2017 national elections.
Madagascar	Field work and consultation with key informants from Governments, Civil Society Organizations, Communities and Key populations undertaken.
Mozambique	Draft LEA report based on desk review initiated by the Regional Consultant while the recruitment of the national consultant is at final stages.
Zambia	National consultant submitted the first draft report which has been reviewed by the UNDP Team and the lead Regional Consultant. The National consultant is working on revision of the report to fill the gaps identified and incorporate the comments in the report.
Zimbabwe	Field work and consultation with key informants from Governments, Civil Society Organizations, Communities and Key populations undertaken. Technical support was provided by the UNDP regional office on a review and analysis of the Public Health Bill replacing a 1924 Act. This has created an opportunity for advocacy and lobbying for the inclusion and protection of Key Populations in the Bill as well as addressing issues of age of consent to access health care services including SRHR/HIV testing treatment and care services for adolescents and young people.

## Intervention 2: Engagement Scans

Draft Engagement Scans in Angola, Mozambique, Zambia and Zimbabwe have been produced and data collection guide for the National consultation developed. A concept note has been developed to identify strategies for operationalizing of the engagement scan after finalization of the reports. This will entail country missions and working with the National and Regional Consultant, National Steering Committee and National Advocacy Working Group and Civil society organisations on how the Engagement scan can be used on the ground. A two days mission is being planned to Zimbabwe in May 2018 to support the national consultant with validation of the Engagement Scan. Developing an engagement scan for

Madagascar is in progress, delays are attributed to the lack of information available on line. Zimbabwe and Zambia ES is expected to be completed in quarter two.

**Intervention 3a. Capacity Building: Regional Meeting National Steering Committee:** A six month follow up evaluation was undertaken to assess the value of the NSC training in understanding issues affecting Key populations and how it can be improved. Participants found the training to be relevant as it improved their confidence and understanding of issues affecting KPs, human rights and the law including the importance of advocating for change. Further their expected roles and responsibilities as members of NSC were clarified. The NSC members recommended that subsequent training should focus more on the science and biology of the LGBTI community; understand more about IDUs and prisoners' rights; identify strategies for leveraging on the various organisations capacities to lead advocacy work; facilitate exchange programmes to countries that have successful LGBTI programmes i.e. South Africa; participants further encouraged frequent meeting for continuous learning and sharing of experiences on the LEA.

In view of the above the regional team has initiated the process for planning the next training for the NSC scheduled for August 2018. A concept note has been developed and being finalized. The main objective will be mapping out of LEA processes and outcomes in the 5 countries and understanding of the LEA outcome, recommendations and the NSC's role in sustained national action on HIV, TB, SRH; build commitment to and leadership for sustained action on HIV, TB, SRH, law and human rights; build specific skills and expertise to increase meaningful participation in the finalization and validation of the LEA, developing national action plan; lastly identify good practices, successes, and lessons learned; share experiences between country NSCs and identify ongoing needs for support and technical assistance; and also provide a platform for ongoing communication, technical support and cross-country support established.

**3b. Regional Meeting on the Integration of YKP Issues in National Curricula:** Strengthening capacities of key stakeholders on Young Key Population and human rights is one of the priority areas for the project and envisaged to be achieved through an institutionalized approach in curricula development or inclusion in national strategic plans. Preparations for undertaking this activity is underway. Consultation with two organisations Kenya Ethics and Legal Issues Network (KELIN) and South African Judicial Education Institute (SAJEI) have been held to try and understand the current programmes delivered for security forces and the Judiciary. KELIN has vast experience in training of security forces on Key populations issues, Law, HIV and Human Rights and SAJEI is hosts to several Judicial Training Institutes in the region to which the project can leverage. A concept note is being developed to outline the process to be engaged for the curricula development. Its noted that most of the Institutions conducting trainings have not developed their programmes into a structured curriculum.

**3c. Showcase YKP issues and the LPP project at the International AIDS Conference:** The consortium partners plan to support participation of young key populations in the International AIDS Conference and showcase the initial outcome of the results to promote issues of young key population on the international platform. Planning for the IAC will commence in the next quarter. Abstracts for presentation and application for a satellite symposium on young key populations have been submitted to the conference organizing committee.

#### **Intervention 4. Roll Out of the YKP Advocacy Guide and SRH Scorecard**

A draft Advocacy Guide for Young people has been developed. The Guide is aimed at strengthening capacities of young people on the processes involved in law reform and development of policies. This quarter the draft Advocacy Guide has been circulated amongst Key Populations Organizations for comments, a Regional validation meeting is also planned for April 2018 with Young People for their final inputs. Preparations for the regional meeting are ongoing, the concept note has been developed, AMSHeR and Country offices are in the process of identifying young people to participate in this meeting.

Following the validation of the KP SRH Scorecard, which is a set of KP Indicators adapted from the WHO on HIV prevention, diagnosis, treatment and care for key populations (2016). AMSHeR is planning the roll out of the Scorecard at national level. A concept note has been developed and discussions held with AIDS Accountability International, an organizations that will lead the process. Implementation of the scorecard will adopt a participatory research approach whereby YKPs are involved in the data collection, validation and population of the tool. AMSHER has secured additional funding from MHAP for the same initiative to be implemented in three other countries outside the project namely Kenya, Cote d'Ivoire and Nigeria. Two countries from the LPP will be prioritized this year Zimbabwe and Zambia.

#### **Intervention 5: Integrate YKP Issues in SADC regional documents**

In 2017, SADC Ministers of Health adopted a Regional Strategy for HIV and AIDS Prevention, Care and Treatment for Key Populations and set SADC Fast track targets towards the attainment of the 2020 targets and 2030 goals. In 2018 the three organisations (UNDP, UNFPA and UNAIDS) jointly supported SADC to organize a meeting aimed at taking stock of the achievements against commitments made in 2017 and sharing experiences on how they have overcome any challenges in the process. This meeting also served as an opportunity to generate a baseline information and road map for implementation of the Regional KP Strategy. A concept note has been developed and planning for the review meeting has been underway this quarter. The meeting is scheduled for the 12-13 April 2018 and will be attended by Technical staff from the Ministries of Health, National AIDS Council Directors and selected Members of Key Populations organisations and young KPs. Young Key populations participation in the SADC meeting in the second quarter as well as the Regional Validation meeting to be held in the next quarter.

Further collaboration is being facilitated with the Evidence for HIV Protection in Southern Africa (EHPSA) to disseminate findings of the latest evidence generated in HIV prevention to Members of States; and to share CSOs perspective and inputs to fast track the prevention agenda. Monitoring tools based on the regional KP Strategy and the targets has been developed and shared with all SADC countries for update.

The SADC scorecard which defines the targets and indicators has been developed indicators that can generate age and sex specific data for key populations have been developed and included in the regional scorecard. The SADC Secretariat, UNAIDS, and UNFPA who are responsible for the data collection and analysis of the score card that will support collection and analysis if the sex and age disaggregated data for key populations.

**Sensitization of SADC Parliamentarians on the Regional Score Card and SADC Strategy:** Consultation meetings have been held with UNFPA and SADC Parliamentary Forum to support a meeting of Parliamentarians and orientation on commitments made at SADC level on the KP Strategy and Fast Track targets. The meeting with SADC PF also seeks to facilitate a draft framework of action aimed at advocating

for anti-discrimination protection in law and policy, decriminalization of KPs, prioritization and protection of KP Services in health plans and programmes, identify actions to address stigma and discrimination, increase budgeting to reduce budget gaps and improved oversight of implementation, amongst others. The meeting is expected to be attended by Members of Parliament Health Portfolio Committee Chairpersons from the SADC member states. Its envisaged that a regional Parliamentary protocol will be developed and agreed upon by MPs as a tool that will protect services targeting KPs in the region. A concept note has been developed and a regional meeting is targeted for the third quarter.

#### **Intervention 6: Capacity Strengthening for YKPs on Policy Engagement; HIV/SRH rights and Access to Justice**

Community strengthening training for the Angola YKPs was undertaken this quarter following postponement from 2017 due to challenges related to mobilization of the YKP community. The training continues to follow the Utetezi Advocacy methodology delivered by AMSHeR Team and a national consultant. The participatory approach provides a platform for engagement with YKPs on identification and prioritizing issues that affect them and further determine the appropriate strategies for addressing them through the national dialogues held. This is followed by a training session on advocacy for social change and understanding the policy making framework. Site/field visits are arranged with local organisations where young people are exposed to established CSO that work in similar areas to gain better understanding on how they conduct advocacy. This enhances peer learning and enables establishments of partnership with the organisations.

YKPs at the meeting prioritized two actions that would form part of the advocacy for 2018:

- Ending sexual violence among key populations, self-stigma and fear of exposure due to health professionals and prison officials' attitude;
- Integration of key populations issues into the sexual and reproductive health programmes in Angola.

A workplan is being developed for adoption by the National Advocacy Working group. It is envisaged that the AWG will meet bimonthly.

#### **Intervention 7: Mechanisms for Community Monitoring**

Following the training of in Angola, AMSHeR assisted YKPs and stakeholders to establish an Advocacy Working Group to monitor the design and implementation of policies and related programmes aimed at increasing services provision to the KP community. The AWG is consisted of 10 members from Civil Society organisations, the Government, National Aids Council and Research Institutions and young people from the LGBTI Community including sex workers. These are individuals selected from the training based on their position in society, networks and participation in strategic meetings. The Director of IRIS is selected as the Chairperson and a Physician from the Espenraca Hospital, nominated as Vice-Chair Person. Other committee members are representatives from the government, National AIDS Council, CSO and KPs. A national Advocacy Plan was developed that would guide the advocacy interventions to be supported. The plan is yet to be costed and finalized for adoption. Additional members can be individuals willing to contribute their technical expertise to the AWG.

### Intervention 8: Baseline Survey:

The baselines on Young Key Populations and access to SRH services are still ongoing. The literature reviews have been undertaken and ethical clearance being sought in most countries and finalization of protocols.

**Table two** summarizes the status of baseline studies in each country by end of March 2018.

Country	Status of baseline survey
Angola	Delays are being experienced in Angola with the research protocol for the country still a pending. The baseline review is constrained due to a very limited range of country sources available and capable researchers on SRHR and especially (young) key populations. A local researcher has been engaged to commence with the field component of the baseline study and sourcing of in-country documentation on KP and SRHR, as well as the development of the research protocol. HEARD is actively searching for additional research capacity to strengthen the in-country team for the operational research.
Madagascar	The research protocol is in the final stages of ethical clearance. A local researcher from the University of Antananarivo has commenced with the field component of the baseline study.
Mozambique	the necessary Ministerial, Provincial and Municipal approvals were obtained for the study's implementation. Local researchers from the University of Eduardo Mondlane conducted the field component of the baseline study with key informant interviews in Maputo, Beira and Nampula. The field data is currently being processed and analyzed
Zambia	A local researcher from the University of Zambia conducted the field component of the baseline study with key informant interviews in Lusaka. The field data is currently being processed and analyzed. The research protocol was finalized during this quarter and will be submitted at the start of quarter two. Though there is progress in Lusaka, finalizing the protocol took longer than expected as it required an intermediary step of consultation and buy-in from critical stakeholders within a context of local sensitivities towards studies that involve men who have sex with men. This extensive groundwork is needed to facilitate implementation of the study and avoid blockages and resultant delays later on in the research process
Zimbabwe	research protocol was submitted to the ethics committee and is currently under review. Local researchers from FACT, in collaboration with the University of Zimbabwe, conducted the field component of the baseline study with key informant interviews in Harare, Mutare and Bulawayo. The field data is currently being processed and analyzed

The baseline survey training methods were reviewed and a decision was made to undertake this training at national level, as part of the in-country preparations for the longitudinal, operational research. Real-time implementation of the training for the research teams will vary per country, as ethical approval processes have different time dimensions.

### Intervention 9: Operational Research

The core regional research team of HEARD was convened in Johannesburg during this quarter to discuss plans for the operational research which is planned to be started in year two and continued in subsequent years of the project.

### Project Coordination and Management:

A two days annual coordination meeting was held with the consortium partners (AMShE and HEARD) on the 25-26 January 2018 at AMShE Regional Office in Johannesburg. In attendance were 4 UNDP Project staff, 3 HEARD Researchers and 7 AMShE staff. The meeting aimed at jointly reviewing 2017 progress; agree on 2018 activities; financial management; and reach consensus on activities that will require partnership. The meeting also provided an opportunity for the consortium members to finalize the 2018 Annual Workplan and annual budget. Additionally, country specific project annual workplans have been developed, finalized and disseminated. The latter will facilitate country coordination on the project.

Monthly project update calls are conducted with all countries to monitor progress and address challenges promptly. Coordination calls between UNDP, HEARD and AMShE are held every six weeks to update each other on the progress and upcoming activities.

As recruitment of all AMShE country focal points was finalized in the last quarter of 2017, the regional AMShE office conducted an orientation and planning meeting for its project staff. This meeting provided a platform for the new Staff members to understand the specific component of the project and how they interact with UNDP and HEARD in implementing the AMShE led activities at national level. The three consortium partners also contributed to the review of various documents and concept notes related to various project activities.

### Progress Summary as per the Annual Work Plan – End of March 2018

Intervention / Activity	Status
1. Five Legal Environment Assessments Reports validated, finalized and disseminated.	In progress
2. Five National Action plans developed and implemented.	In progress
3. Five Engagement Scan finalized and Action plans developed and implemented	In progress
4. One Regional meeting held with the LEA National Steering Committee	In progress
5. One Regional meeting held for the integration of YKP issues in National Curricula	In progress
6. YKP Advocacy Guide and SRH Scorecard rolled out in the five countries.	In progress
7. Community dialogues, and training held in Angola and Madagascar including establishment of Advocacy Working groups.	Completed Madagascar (Q2)
8. Implementation of Advocacy Plan and Capacity Assessment in Mozambique, Zambia and Zimbabwe	In progress
9. Community Capacity Building meetings and training held in Mozambique, Zambia and Zimbabwe.	In progress
10. Small grants to YKP Organisations and Groups established	Q3
11. Implementation of Advocacy Work plans	In progress
12. Integrate YKP Issues in the SADC SRH Scorecard	Completed
13. Sensitize SADC Parliamentary Forum on KP Strategy	In Progress C/N
14. Support YKPs to participate in Regional Meetings and Events	Q2/Q3/Q4
15. Finalize Baseline data on SRH and Indicators	In progress
16. Five Operational Research Reports produced in the five countries.	In Progress
17. One Annual Planning Meeting held	Completed