The WAPCAS/ Global Fund NFM II Project: CSS Intervention

Special Edition

NEWSLETTER
Volume 1

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The Community Systems Strengthening (CSS) component of the WAPCAS/ Global Fund NFM II Project seeks to achieve improved health outcomes by developing the role of key affected populations, communities and CSOs in the design, delivery, monitoring and evaluation of services and activities related to prevention, treatment, care and support of people affected by HIV, tuberculosis, malaria and other health challenges.

We are delighted to introduce this first edition of the CSS intervention newsletter. This edition is to share experiences and contributions of community members towards achieving positive health outcomes related to prevention, treatment, care and support of people affected by HIV, tuberculosis, malaria.

As you read the stories of successes and achievements of the CSS intervention, remember the efforts of community members in ensuring the attainment of the 90-90-90 HIV targets and ending the global TB epidemic.

We intend to make it a regular publication and to use it to keep informed about news and developments related to CSS and its implementation. The CSS team is absolutely convinced that you will learn more from the value and importance of community members, which results forms our work.

ACRONYMS

CBOs	Community Based Organizations
CCM	Country Coordinating Mechanisms
CSOs	Civil Society Organizations
CSS	Community Systems Strengthening
GHANET	Ghana HIV and AIDS Network
HFFG	Hope for future Generations
NAP+	National Association of Persons Living with HIV
NGOs	Non-Governmental Organizations
NSA	Non-State Actors
NTP	National Tuberculosis Program
MoH	Models of Hope
TB	Tuberculosis
TGF NFMII	The Global Fund New Funding Model II
SAMCs	Social Accountability Monitoring Committees
SR	Sub-Recipient
UHC	Universal Health Coverage
WAPCAS	Ghana-West Africa Program to Combat AIDS and STI

Communities, Civil Society Organizations (CSOs) and Community-based Organizations (CBOs) play an important role in the design, implementation, monitoring and evaluation of community-based HIV, TB and malaria interventions. However, the recognition of the immense role of these communities in HIV, TB and malaria interventions are often under-supported.

The Global Fund prioritizes interventions that seek to strengthen existing community structures such as key populations, networks, CSOs, CBOs, public and private sector actors to positively respond to HIV, TB and Malaria interventions by increasing community participation, ownership and accountability in order to produce expected health outcomes.

The CSS intervention seeks to achieve improved health outcomes by developing the role of key affected populations, communities and CSOs in the design, delivery, monitoring and evaluation of services and activities related to prevention, treatment, care and support of people affected by HIV, tuberculosis, malaria and other major health challenges.
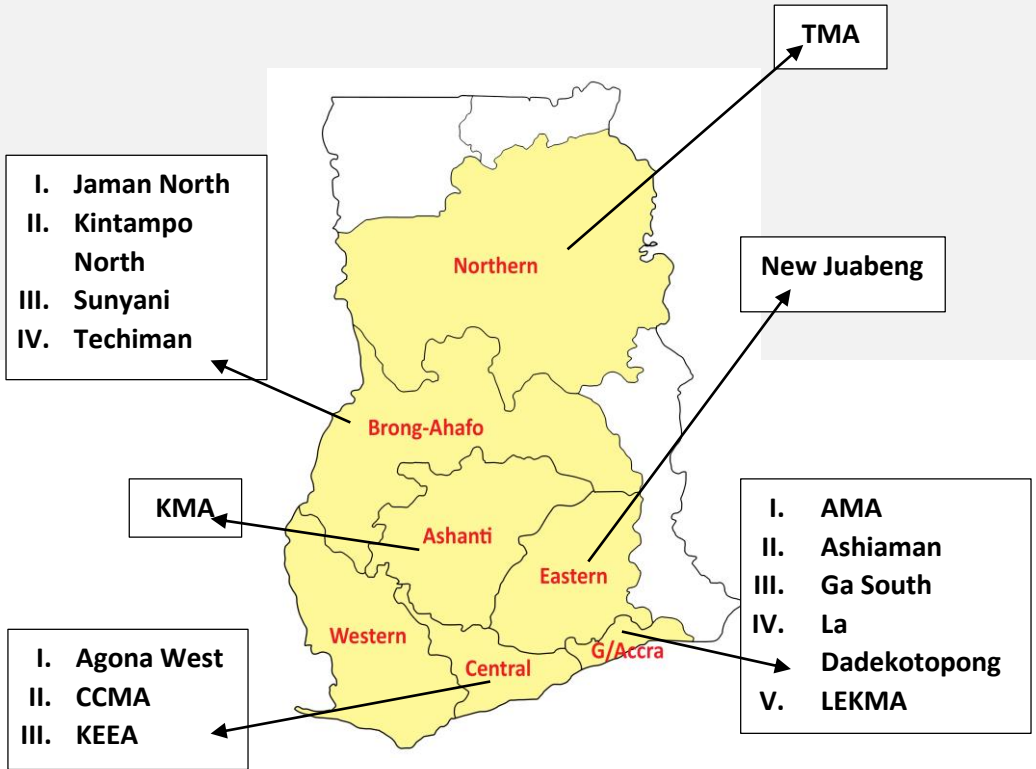
The CSS intervention has four objectives, namely:

- Increase community and organizational capacities for effective implementation of HIV, TB and malaria programs

- Improve social mobilization, community linkages and collaboration

- Strengthen community-based monitoring for social accountability and advocacy

- Improve Project Management.

HFFG was selected in 2018 as a Sub-Recipient (SR) by the Ghana-West Africa Program to Combat AIDS and STI (PR) to implement the CSS intervention in Ghana with partners including the Ghana Health Service, the Network of Persons Living with HIV (NAP+ Ghana), Ghana TB Voice Network amongst other stakeholders.

The Community Systems Strengthening intervention is being implemented in 7 regions. However, for the Western region the intervention is only concentrated on the activities of MoH. The regions are namely; Ashanti, Brong Ahafo, Central, Eastern, Greater Accra, Western and Northern regions of Ghana in selected 15 districts.

TMA

I. Jaman North
II. Kintampo North
III. Sunyani
IV. Techiman

New Juabeng

KMA

I. AMA
II. Ashiaman
III. Ga South
IV. La Dadekotopong
V. LEKMA

I. Agona West
II. CCMA
III. KEEA

Placement of MoH in health facilities in 33 districts in partnership with NACP, NAP+ Ghana and Ghana Health Service

Selection and training of TB champions in partnership with Ghana National TB Voice Network, National TB Programme and TB coordinators in the 15 CSS districts

Provision of a technical assistant by GF to develop a community based monitoring and feedback strategy

Selection and training of SAMC members in the 10 regions and National level in Ghana

Organization of community coordination meetings in the 15 CSS districts in partnership with NAP+ Ghana and Ghana National TB Voice Network

Organization of Semi-Annual stakeholder engagement and dialogue meetings in the six CSS regions in partnership with Ghana Health Service

Joint community monitoring with CCM, WAPCAS, NAP+ Ghana and Ghana National TB Voice Network

Joint monitoring by SR, NAP+ Ghana and Ghana National TB Voice Network

Harmonization of HIV, TB and Malaria Advocacy plans into one harmonized plan in partnership with WAPCAS, NACP, NTP, NMCP, Stop TB, NAP+ Ghana, Ghana National TB Voice Network, Malaria Coalition, Non-State Actors and other CSOs

CSS component of TGF NFM II in 6 regions in Ghana.

1,207 PLHIV enrolled to care after defaulting

10,317 New PLHIV contacted by Models of Hope in **108** facilities

11,040 Old PLHIV contacted by Models of Hope in the various facilities they work

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CSS component of TGF NFM II in 6 regions in Ghana.

29 Trained TB champions from 15 districts in 6 regions.

158 Positive TB cases identified through the work of TB champions.

The Global Fund · WAPCAS · HFFG · TB VOICE NETWORK
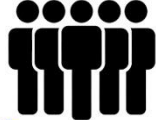

CSS component of TGF NFM II in 6 regions in Ghana.

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107 individuals trained as Social and Accountability Monitoring Committees for effective implementation and advocacy

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CSS component of TGF NFM II in 6 regions in Ghana.

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1431 Communities engaged in the implementation of the CSS

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"The CSS intervention seeks to achieve improved health outcomes by developing the role of key affected populations, communities and CSOs in the design, delivery, monitoring and evaluation of services and activities related to prevention, treatment, care and support of people affected by HIV, tuberculosis, malaria and other major health challenges."

A Model of Hope interacts with other PLHV at a quarterly coordinating meeting.

15 years with HIV, and now giving 'Hope' to PLHIV community members

One of the main objectives of the Community Systems Strengthening (CSS) intervention is to embolden the capacity of community members, increase social mobilization, community linkages, participation, collaboration, ownership and accountability in HIV, TB and Malaria interventions.

This is largely because the Global Fund believes community networks have a unique ability to interact with affected communities, react quickly to community needs and issues, and engage with affected and vulnerable groups.

There are 216 Models of Hope engaged under the CSS component of the WAPCAS/ Global Fund NFM II Project. The Models of Hope concept is a peer support system where individuals within the Network of Persons Living with HIV (NAP+ Ghana) are trained and resourced to provide basic psychosocial counselling, nutrition, anti-retroviral medication (ARV) adherence, and home-based care support and complement the work of health official in health facilities by using their experience to provide HIV-related information and services to new and old community members.

Through the efforts of these Models of Hope, 21,357 PLHIV have been assisted from October, 2018 – June, 2019 from various health facilities. Approximately 1207 lost to follow up HIV cases have been traced and brought back to care within the project districts.

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Jacqueline Nyarko has been trained as a Model of Hope since 2008, 4 years after she was put on Anti-Retroviral Drugs. Based in Cape Coast, she undertakes risk assessment and referral for HIV testing services, provide education and mobilization for services, follow up on newly diagnosed HIV positives and early initiation on treatment, adherence, defaulter tracing, psychosocial support as well as home based care support.

TB is the leading cause of death among people living with HIV. 'Aunty Jacky' as she is affectionately called by her community has helped identify 19 positive TB cases within her community.

She believes the capacity training she has received under the CSS intervention has gone a long way to empower community members to be in the position to take care of themselves.

"The intervention has helped strengthen the bond between newly HIV Positives and old ones. To end HIV means everyone affected must be brought on board. It is all always a joy for me to see community members interact happily and support each other," she said.

Finding the missing TB cases, empowering community members

Marlies offers TB education in communities

Though treatable and curable, Tuberculosis (TB) is one of the top 10 causes of death worldwide, killing 1.6 million out of the 10 million people who fell ill with TB in 2017, the World Health Organization (WHO) estimates.

In July, 2017, Marlies Thomastina Aggrey, 24, was tested positive for TB at the Ewim Polyclinic Cape Coast, Ghana, West Africa. She went through a six-month treatment course, and completely got cured of the disease.

Ending the TB epidemic by 2030 is among the health targets of the global Sustainable Development Goals (SDGs). However, many people with active TB are missed each year and are therefore not reached with TB treatment services.

To successfully end the TB epidemic means these missing TB cases must be found. The Global Fund and its partners recognizes that the TB community, including cured TB patients have an active role to play in ending TB.

As a cured TB patient, Marlies is one of 29 TB Champions from 15 districts provided by the National TB Voice Network and trained under the Community Systems Strengthening (CSS) component of the Global Fund New Funding Model II (TGF NFM II) to find and report TB cases.

As a TB Champion, she undertakes treatment monitoring, contact tracing, intensified case finding, TB-DOTS adherence counselling, follow-up on lost cases, drug monitoring at facilities, effective documentation and reporting of TB cases.

"Through the capacity building training I received under the CSS intervention, I use myself as an example to educate my community members on Tuberculosis. So far I have identified 12 TB positive cases who are now on treatment. I'm proud to be called a Tb champion because I fought Tb and I won. My aim is to help eradicate TB in my community ".

Collectively, 158 positive TB cases have been identified through the work of the TB champions from November 2018 to June 2019.

ADDRESSING STIGMA

TB stigma is a threat to the global TB response -- It serves as a barrier preventing people from accessing treatment and support.

Clement Obah is a TB Champion based in Sampah, Jaman North District. He moves from one community to another to educate people not to hide their TB cases but rather seek early medical attention.

Clemet says he is motivated to do so due to how he was stigmatized against as a TB patient in 2018.

"One day I went to a health facility and immediately some of the people got to know I had Tuberculosis they started moving away from me. I was very sad that particular day, and I don't want anyone to go through the same thing," he narrates.

Clement Obah (Right)

When people feel stigmatized against due to a disease, they are   likely to not seek treatment, putting others at risk. Through the CSS intervention, I move from one community to the other telling people not stigmatize against persons diagnosed with Tuberculosis since it is curable. Community member need to be encouraged against self-stigma and I am glad I can help through this intervention from the Global Fund.

Clement, since becoming a Tb champion has identified 13 positive TB cases some of whom are HIV positive

Swearing in of SAMC executives.

ED of WAPCAS at a review meeting with TB Champions.

A CSS Project Coordinator at a monitoring visit at Kintampo North.

ED of HFFG meeting with some PLHV.

A TB Champion on community sensitization.

HFFG Ghana   HFFG2001   HFFG Ghana