# GOOD PRACTICES

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**Target differentiation in NFM 3. P2** 



**Assets in the fight** against hiv: self-testing and prep. P3



The contribution of networks to the response to HIV and AIDS. P4























#### Content

# The third phase of the Global Fund's New Funding Model in Cameroon (NFM 3): a wealth of innovations for health!



The launch of NFM3, which covers the 2021–2023 period, comes this year in a particular context marked by the COVID 19 health crisis; and the transition from the three 90s to the three 95s initiated by the World Health Organisation (WHO). In Cameroon, the epidemiological situation presented at the official launch ceremony of the NFM 3 in June 2021 estimated the number of People Living with HIV (PLHIV) at 496.506 including 329,334 (66%) women and 34,554 (7%) children under 15 years of age. These worrying figures justify the increase in the strategies adopted in the NFM3, in view of the urgent need to act to reduce the incidence of HIV/AIDS in the general population.

To this end, innovative interventions have been developed, including PrEP (Pre-Exposure Prophylaxis), non-clinical testing, index testing, self-testing (ST), DIC (Drop in centre) and the taking into account of gender and targets through the differentiated approach in the provision of health service to the population.

These new strategies will not only enable community actors to reach hard-to-reach targets, but also to offer them appropriate services that meet their specific needs with the full involvement of community based organisations. Hence the need for this beneficiaries to own the NFM Mechanism in order to effectively respond to the expectations of the beneficiaries and achieve the objectives set by the country and its technical and financial partners.

Charles ONANA Strategic monitoring manager

### A Human Rights subrecipient in Cameroon

ne of the major innovations in the fight against HIV/ AIDS this year is the recruitment of a Human Rights Sub-Recipient (SR). Since the advent of the Global Fund's New Fundina Model, the promotion and respect of human rights has always been at the centre of the strategies. This priority has been reinforced in the NFM3 framework through the selection by the Principal Recipient of the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), as Sub-Recipient in charge of the management of the «Human Rights» component in order to promote and protect the rights of key populations and the most vulnerable as they are the ones who most often suffer from discrimination and social rejection.

For three years (2021-2023), GIZ is mainly responsible for reducing barriers to access to health care service and decreasing discrimination and stigmatisation in public administration, education structures, workplaces, media and social networks. To carry out these interventions, activities such as

training of health providers on human rights and medical ethics, sensitising legislators, law enforcement officers, lawyers and magistrates, establishing legal clinics and recruiting legal counsellors, are adequately implemented by the GIZ in order to improve Quality service delivery to key populations and vulnerable persons. This is a positive point for the fight against HIV/AIDS, as there can be no «health for all» without human rights respect.

■

Montserrat MFOULOU chargé de communication ACT

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## Nouvelles Stratégies



## The differentiated approach to targets in NFM 3

he differentiation strategy is a new approach that takes into consideration the needs and specificities of each individual. In the joint concept note HIV/AIDS, Tuberculosis Malaria (2021-2023) for the Global Fund, the differentiated approach intervenes more with women because they are the most affected and exposed to the disease.

According to Profile of HIV Estimates and Projections in Cameroon, 2019-2021, in the 10-19 age group, young girls recorded about six times more new infections (2,097) than young boys (351) did. In addition, there are 308.079 women among the 506.432 people living with HIV in Cameroon in 2019. To reverse the graph, the option of differentiating targets has been retained and is involved in prevention,

screening and treatment support towards care and early ARV treatment.

Among young adolescents constituency, for example, we distinguish young adolescents out of school, and young adolescents in school with a mentoring approach specific to the two targets. While among women, we distinguish pregnant women and women of childbearing age, breastfeeding women, etc.

A whole section devoted to the prevention of mother-to-child transmission has been developed with an emphasis on the integration of family planning services, vaccination services, and the monitoring of pregnant and breastfeeding women from the SW (Sex Worker) and intravenous drug users (IVDU) community.

Montserrat MFOULOU in charge of communication

Point of view of the director of the association "Positive Vision" on the Differentiation of the Targets and the Contribution of the Global Fund grants

6 Positive Vision" is a community-based organisation that was created in September 2015 and aim to address the specific need of transgender women in Cameroon. At the beginning of our activities, we only dealt with the prevention aspect with the distribution of prevention material and educational talks. Today, thanks to the Global Fund, we have been able to implement much more specific activities as grant beneficiary.

Indeed, since then, we do not encounter prevention materials stock-outs problem as in the past years. Other positive change is the availability of transwomen-frienaender dly health facilities for the specific care of our member leaving with HIV, included the syndrome management of STIs. All these activities now allow us to have a better tractability and documentation on the evolution of HIV/AIDS pandemic in the transgender target group.



Aimé KIKI directrice de positive vision

Taking into account, the transgender specific target group is a big plus in the fight against HIV/AIDS, as we were previously mixed with MSM constituency. This difference will allow us to adequately respond to the specific needs of transgender people. Thanks to the Global Fund, we have moved from primary prevention activities to the comprehensive care of PLWHA. A remarkable advance in the fight against STIs and HIV/AIDS". ■

Collected by Montserrat MFOULOU

### **New Strategies**

## Why the new strategies as a means of additional HIV testing and prevention?



Innovative strategies in NFM 3 include demedicalized screening self-testing (ST) and pre-exposure prophylaxis (PrEP). They strengthen HIV testing and prevention services in order to reduce new infections.

#### Self-Testing

Self-testing is an intervention in which HIV testing is done by the individual. It aims to reduce the under-diagnosed rate of HIV infection that remains high among key populations. This strategy is an asset because it allows us to screen and reach hidden, hard-to-reach PEP (most-at-risk people) who do not attend health facilities and refuse to be tested during mass cam-

paigns; The goal is to overcome stigma, increase the number of PPERs who know their HIV status (HIV-negative or HIV-positive), increase access to HIV prevention and treatment services and ultimately reduce the number of undiagnosed HIV infections among key populations.

The primary targets of this testing strategy are key populations and their partners. It is implemented in the

community by peer educators, peer mentors, information sessions (IS) coupled with testing campaigns, individual IS and self-testing sessions organized.

#### La PrEP

PrEP is specifically targeted at people who are continuously at risk of contracting HIV, including those who do not consistently use condoms during sex or who engage in unsafe sexual practices. Despite decades of prevention efforts focused on behavior change and condom use, Cameroon continued to experience a high incidence of HIV, with approximately 28,000 new infections per year since 2010, a significant portion of which are among key populations, making it a priority target for PrEP. This intervention consists of the use of ARV drugs by HIV-negative people to prevent HIV infection.

Within the framework of NFM 3, the PrEP strategy is

applicable only in the cities of Douala and Yaoundé with TS and MSM. PrEP initiation and follow-up of PPERs on PrEP is done only in health facilities and ICDs. The role of community actors is to sensitize PPERs about PrEP, mobilize them and refer them to the health facilities or DICs.

Ultimately, these two new interventions will make it possible to achieve one of the goals of the Global Fund's support, namely to reduce the rate of new infections among key populations by increasing the level of knowledge of the serological status of PPERs, early management of confirmed cases and the strengthening of preventive measures among HIV-negative individuals.

Dr Joelle DJAYA : Health Specialist CHP

# The community management stategy

he advent of new information and communication technologies is forcing the world to operate in a new way. In all areas, it is impossible to ignore the important place that social networks (Facebook, Twitter, Instagram, YouTube, WhatsApp, etc.) play in people's lives

This is specifically the case in the field of health and awareness raising. Knowledge of social networks and their respective use are becoming essential in mobilizing, raising awareness and converting People at Higher Risk (PPER) or Hart-To-Reach to the use of health services. It is

in this perspective that, within the framework of the Global Fund Project, it is a question of bringing into play all awareness-raising strategies, as is the case with Community Management.

Classified among the innovative strategies of the PFM, Community Management complements the community strategies already implemented. It makes it possible to reach individuals who could not be reached during information sessions, face-to-face meetings, etc.; have access to the right information on sexual and reproductive health and link to treatment. Specifically, this innovative



strategy aims to increase the visibility of the activities of organizations, accelerate prevention and fight against stigma and discrimination through social networks, promote self-testing, PrEp among the target and mobilize and guide PPERs to FO-SAs through a digital conversion channel, etc.

This strategy is implemented by CAMNAFAW and its sub-recipients. A collaboration that extends with the Coalition of Civil Society Organizations (CSOs).

In addition, the innovation of NFM3 is to involve specific players, especially web influencers. These will be information relays that will make it possible to reach all digital discussion forums to expose as many people as possible to the right information.

the right information. 
Audrey AKOA
Community Manager PJD