# GOOD PRACTICES 2

**Publishing director:** 

Kevin AMBAH EVINA

Seat: 5027 Street Titi garage

BP 14760 Yaounde Cameroon

secretariat@affirmativeact.org

Site Web: www.affirmativeact.org

f Affirmative Action Officiel

Half-yearly N° 00002 December 2021



The active research community agent at the heart of the fight against tuberculosis



Cameroonian HIV Month: focus on digital awareness



KAP Covid survey: an achievement of civil society organisations

























## New Stratégies

## A CALL TO REMOBILIZE THE TROOPS



n the long struggle to control HIV and TB, it has become essential to place communities at the centre of any effective national response to these diseases. Wherever communities are not involved, populations are particularly vulnerable

and face stigma and discrimination. They often even die from the disease, when treatment fails and families are devastated.

The Global Fund's merit lies in its ability to involve communities and key populations in the fight against HIV and TB. As these diseases have spread to most African countries, they have reversed much of the development progress made over the past 50 years. Global Fund financing has restored hope to those countries that have had the opportunity and good fortune to benefit from it.

Today, community health is an integral part of public health and has a prominent place in the 2021-2023 grant of the Global Fund to Control AIDS, Tuberculosis and Malaria. It is based on the effective participation of communities in improving and promoting health through the identification of priority needs, the consensual definition of appropriate collective actions in the management and evaluation of interventions, the selection of a Principal Recipient and Sub-recipients all from the community in order to address all issues related to the prevention of HIV and tuberculosis for key and vulnerable populations.

Therefore, it is necessary for all community organisations to intensify prevention actions by implementing in an efficient way, alongside the classical strategies, the new innovative strategies such as demedicalised screening, self-testing, PrEP, Drop in Centers, Addiction Centres and many others in order to reach the targets and to obtain more convincing results in relation to the achievement of the 95-95-95.

Despite all the difficulties that could be encountered in conducting this process and in implementing the activities, we strongly recommend the mobilisation of all in order to capitalise on this grant and contribute substantially to the reduction of the effects of HIV/AIDS and Tuberculosis.

This second edition of the Good Practices magazine is a contribution to the dissemination of good practices learnt from the Global Fund in the framework of the implementation of NFM2 and all other programmes, in order to enable everyone to own them and to perpetuate the label of the Global Fund to fight HIV, tuberculosis and malaria.

Pauline NGAH,

President of the CCM Strategic and Monitoring Committee

## Civil Society Organization Representation at the CCM: What if it was time to be re-engaged?

etting out of the torpor and showing more vigour: this could be the call to civil society organisations (CSOs) at the end of the workshop to strengthen the commitment of civil society to the Country Coordinating Mechanism (CCM) held in Douala from 16 to 18 November 2021, with the technical and financial support of the Global Fund and the GIZ (Back-up Health).

In the wake of the \_CCM evolution project completed in Cameroon in 2019. these meetings follow a baseline assessment carried out in 04 Regions (Adamawa, Centre, West and South) by teams of surveyors from the Task Force set up for this purpose within the CCM. Through focus groups and a matrix specially designed by GIZ consultants, this study enabled to collect crucial data from some CSOs that are members of the CCM and from about 60 CBOs working closely with the target communities. The

analysis was then done in four main areas: involvement in CCM coordination and strategic monitoring; coordination, representation and participation in the CCM; involvement in funding request processes; and involvement in community monitoring.

It was found that most of the CSOs/CBOs surveyed are not very engaged in the Global Fund's grant steering and monitoring processes. Hence the urgent need to revitalise the CSO delegation at the CCM, particularly through the adoption of a charter and terms of reference for civil society, the development of an engagement and communication plan, the recruitment of a communication consultant at the CCM, and the integration of community-based monitoring into strategic grant monitoring.

Charles ONANA (ICN)



## **INCREASED COMMUNITY INVOLVEMENT IN TB** CONTROL



the past 10 years, Cameroon has made significant progress in TB control, especially with: a decrease in transmission, a fivefold increase in the screening rate as it has risen from 11% to 54%, the adoption of short courses of treatment for MDR-TB (Multi-Drug Resistant Tuberculosis), and the strengthening of cohort treatment, which was remarkably successful in 2015 with a cure rate of 81%. Within the framework of the Global Fund/New Funding Model 2 (GFP-NFM2) project, the experimentation of the community-based active TB case-finding strategy proved the real capacity of community workers to contribute to the achievement of such results. However, to further improve the performance of the National Tuberculosis Control Programme, the Country Coordinating Mechanism for Global Fund grants has entrusted the implementation of the community-based prevention component of TB control to CAMNA-FAW as Principal Recipient and the NGO FESADE as Sub-Re-

cipient for GFP-NFM 3 (2021-2023).

## TB Active-case finding:

There are many obstacles such as lack of travel expenses, under-information, as well as false beliefs within the communities, which continue to create stigma and maintain the gap between the populations, especially PLWHA and the health services. To address this, community-based organisations have developed the active case-finding strategy. Active TB case-finding, unlike the traditional approach, anticipates by going to the population to detect possible cases. The innovative aspect of this method is the introduction of the Community-based Active Case Finding (ACF) worker alongside the communities and health services. It provides the beginning of a solution to a number of difficulties that for a long time have contributed in keeping essentially needy communities away from their health services.

## ACF: a project owner at work for his community.

The Community-Based Active case finding worker carries out community-based interventions within the population, and is also the link between the community and the health facility. They provide reliable and quality information to beneficiaries through household surveys, door-to-door visits. outreach campaigns, etc. The impact of their actions can be appreciated in terms of behavioural change, especially with regards to the stigmatisation of the person affected by and who survives tuberculosis in the community. ACF undoubtedly strengthens the health system by collecting quality data in the field and sending them to the decision-makers. Also, a new form of community-based TB screening is being implemented in the NFM3: the transport of sputum.

Jessica NGO SECBE FESADE

**Rédacteur en chef :** Montserrat MFOULOU (*Chargé de la* communication)

### Comité de relecture :

Jacques OMBILITEK (Directeur Exécutif Adjoint) Joseph MEŚSINGA (consultant)

### Comité de suivi :

Dr Jessica NGO SECBE (Heath Spécialist), Céline Chrystelle NDJINA (Chargé de la communication) , Yves Roger BELINGA (Community Manager), Edith Mouna (Directrice Administrative et Financière), Charles ONANA (Responsable du suivi stratégique), Dr'Joelle DJAYA Heath Spécialist (CHP) , Audrey AKOA (Community Manager (PJD))

## Création graphique:

Hervé YOUDOM YOUBI (C.E.O Y-Graphic Design)

## **New Strategies**

# Cameroon AIDS Month 2021: Web influencers and community managers at the frontline of the fight against HIV and AIDS



Cameroon, together with the international community, celebrates every 1st of December the World AIDS Day. As a prelude to the celebration of the 2021 edition under the theme "End inequalities. End AIDS. End pandemics". The response actors under the supervision of the National AIDS Control Committee (NACC) are mobilized under the "Cameroon AIDS Month" through a vast sensitization campaign with the aim of reversing the trend of new infections and reducing HIV-related stigmatisation and discrimination. This strategy is worth its weight in gold because of the advent of Covid 19, which imposes a

new pace of life on the population. Barrier measures such as the compulsory wearing of masks and the restriction of gatherings of more than 50 people have led to a strong mobilisation of stakeholders around digital sensitization.

Innovative strategies, such as digital communication by community stakeholders, are being used to achieve this. As part of the NFM3 global fund project, web influencers trained under the project and community managers are playing a leading role in the national digital information and communication campaign initiated for Cameroon Month 2021. Through social media, messages of awareness and mobilization are spread to key populations and vulnerable groups aiming, among other things, to encourage Internet users to request for HIV/AIDS-related services. The broadcasting of a web series on STIs, key messages on HIV, stigma and discrimination are some of the activities that have been part of this communication. In addition to this digital campaign, community workers' strong action in the field, the «test end treat» strategy and the sense of responsibility of citizens will undoubtedly enable the achievement of the «95-95 -95» goal set by the UNAIDS.■

Céline Chrystelle NDJINA (CNLS)/ Yves Roger BELINGA (CAMNAFAW)

## Civil society organisations at the centre of community-based research.

he outbreak of Covid motivated the financing of a response programme against Covid by the Global Fund as part of the implementation of activities for the three (03) diseases. One of the activities retained in this programme is the Knowledge, Attitudes and Practices (KAP) survey addressed to vulnerable groups and key populations on HIV/AIDS and access to care in Cameroon.

This survey was carried out by the group of civil society organisations under the supervision of the CCM coordination bodies with the collaboration of the HIV, Malaria and TB programmes and the Ministry of Public Health through the Department of Operational Research. The objective of this study was to assess the knowledge, attitudes, practices and access to care of vulnerable groups and key populations in Cameroon with respect to COVID-19.

The data collected in the field indicated that more than half of the key HIV populations and vulnerable populations of three diseases (HIV,



TB and malaria) had inadequate knowledge, attitudes and practices about COVID-19. Moreover, fear of becoming infected with the disease significantly reduced attendance at health facilities and access to care in the context of COVID-19.

This community-based research was both an opportunity and a challenge for civil society organisations, as they were involved in all stages, from the design to the production of the final document. This experience has not only strengthened community knowledge about the new epidemic and built capacity in the survey process, but has also encouraged their

involvement in the development of innovative strategies and techniques to reach the targets.

The COVID KAP survey carried out by the Coalition of Civil Society Organisations is therefore a bonus for the participation of community members whose involvement is still a weak link in the Cameroonian health system. In short, it contributes to strengthening community involvement in the implementation of health policies for an effective, efficient and sustainable community health system.

Montserrat MFOULOU (ACT)/ Edithe MOUNA (CSSC-Health)