



NEWSLETTER

*Latest News and Updates from the Regional Community
Treatment Observatory in West Africa*

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ABOUT THE RCTO-WA

How We Started

Community based monitoring offers the potential of increasing domestic oversight and advocacy for improvements to HIV treatment, particularly as it affects key populations. Affected communities consume most ART services but usually lack the necessary capacity and information needed to participate meaningfully in decision-making that shapes treatment programs that directly impact their lives.

Having monitored repeated stock outs of HIV medicines in West Africa through its Treatment Observatories, ITPC submitted an Expression of Interest (EOI) to the Global Fund in April 2015. The proposal intended to provide catalytic support to centralize and standardize treatment access data, through the creation of treatment observatories in 11 West African countries, in order to improve regional advocacy for ART access. In August 2015, we were invited to submit a full Concept Note. Unprecedentedly, our funding proposal was supported with endorsements from all 11 Country Coordinating Mechanisms in the region.

To ensure the Concept Note was informed by the priorities of communities in the region, we hosted regional consultations. ITPC facilitated an online regional dialogue that captured responses in

French and English from more than 150 individuals from throughout the region. Following this, we brought together 35 participants from 11 West African countries in December 2015. [Read a summary of the West Africa regional consultation \(PDF\).](#)

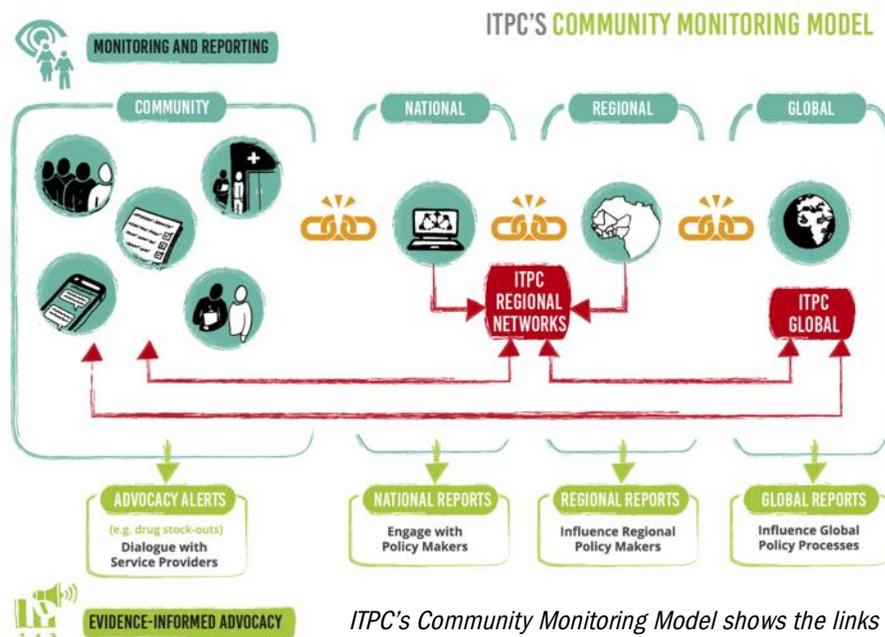
In 2016, the Global Fund approved a 3-year grant (January 2017 and December 2019), to enable ITPC to support the development of Community Treatment Observatories (CTOs) in West Africa, empowering networks of people living with HIV to systematically collect and analyze

“This grant is not only timely, but also essential,” explains Solange Baptiste, Executive Director of ITPC. “Although treatment coverage globally is around 40%, in West and Central Africa it averages 24% with some countries as low as 4%. Shockingly, fewer than one in five people living with HIV have access to anti-retroviral therapy (ART) in West Africa”.

qualitative and quantitative data on barriers to access. The goal is to increase access to treatment in 11 West African countries: Benin, Côte d’Ivoire, Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Mali, Senegal, Sierra Leone and Togo.

About Community Treatment Observatories

A community treatment observatory is a mechanism that systematically collects data to monitor trends on treatment access along the HIV Cascade to be used for targeted action. Monitoring of health systems by communities increases government accountability and informs targeted advocacy actions that can improve HIV treatment, particularly for key populations. Data is currently being collected in a fragmented way and does not integrate questions and themes important to those most affected



ITPC's Community Monitoring Model shows the links between community and mechanisms at the national, regional, and global level.

by HIV. Our work under this grant will help to streamline and standardize treatment access data into the Regional Community Treatment Observatory in West Africa (RCTO-WA).

The creation of community treatment observatories, as pioneered by ITPC, involves networks of people living with HIV collecting data in a systematic way to monitor the drug supply system in each country and to document and alert activists of critical ARV stock levels and management (or mismanagement) issues. People living with HIV and their allies will be trained, and provided with technical assistance to collect and analyze appropriate data and to use this data for advocacy for increased access to treatment.

Our Mission and Objectives

The RCTO-WA will develop 11 national and one regional Community Treatment Observatories. The Observatories will empower networks of people living with HIV to systematically collect and analyze qualitative and quantitative data on barriers to accessing HIV treatment. The goal over the next three years is to increase access to treatment in the 11 West African countries, which are: Benin, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Senegal, Sierra Leone, and Togo.

Under this goal, the project has three objectives:



The 11 West African countries of the RCTO-WA

Objective 1: Formalize and expand existing community treatment observatories to all focus countries

Objective 2: Create a regional treatment observatory

Objective 3: Build the capacity of 11 national PLHIV networks to do treatment monitoring



“The project will provide more comprehensive data to inform decision-makers. It aims at the production of information, exchange and research in order to provide factual elements for making relevant decisions, including for key populations.” – Astou Diop, Chair of ITPC West Africa Board

MEET THE PARTNERS

During the pre-grant implementation process, it was decided that both ITPC Global and West Africa will co-share the responsibilities and duties of the Principal Recipient over the grant-cycle. As Sub-Recipients, national networks of people living with HIV will lead implementation in each of the 11 countries. The regional network of people living with HIV will support regional efforts and activities as part of the program. Community Consultative Groups, comprised of Key Populations, women and adolescents living with HIV, will be established to complement the efforts of the networks in the implementation of CTOs at national and regional levels.

Principle Recipients

ITPC Global – The International Treatment Preparedness Coalition (ITPC Global) is a worldwide coalition of people living with HIV and community advocates working to achieve universal access to optional HIV treatment of those in need. Formed in 2003 by a group of 125 HIV activists from 65 countries at a meeting in Cape Town, South Africa, ITPC actively advocates for treatment access in eight regions across the globe. ITPC believes that the fight for HIV treatment remains one of the most significant global social justice issues.

Through the support of donors such as the Open Society Foundation, the M.A.C AIDS Foundation, the Levi

Strauss Foundation, Aidsfonds and UNITAID, ITPC has been able to support over 850 grassroots groups in over 100 countries through the work of our global team and our 9 regional networks across the globe. In the past three years alone, ITPC partnered with 130 organizations in 50 countries to refer 40,000 people to health services, train 30,000 people, carry out 5,000 advocacy activities, secure over 70 policy changes or new commitments, and engage 62,000 people in advocacy work.

ITPC West Africa – The International Treatment Preparedness Coalition – West Africa (**ITPC WA**) is a regional coalition of people living with HIV and community advocates. The network was established in 2008 in

Grand Bassam, Côte d’Ivoire. Formerly known as the West African Treatment Action Group (WATAG), ITPC West Africa works to ensure universal access to care, treatment and any form of support to PLHIV and their strong involvement in the decisions that affect their lives. ITPC West Africa operates in the following West African countries: Burkina Faso, Cape Verde, Côte d’Ivoire, Ghana, Guinea Bissau, Guinea Conakry, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone, The Gambia, and Togo.

Sub-Recipients

As sub-recipients, national networks of people living with HIV will lead implementation in each of the 11 countries:

Country	Sub-Recipient
Benin	Réseau Béninois des Associations de Personnes vivant avec le VIH (REBAP+)
Côte d’Ivoire	Réseau Ivoirien des organisations de Personnes vivant avec le VIH/SIDA (RIP+)
The Gambia	Gambia Network of AIDS Support Societies (GAMNASS)
Ghana	National Network of Persons Living with HIV in Ghana (NAP+ Ghana)
Guinea Conakry	Réseau Guinéen des Associations de Personnes infectées et affectées par le VIH/SIDA (REGAP+)
Guinea Bissau	Rede Nacional das Associações das Pessoas Videntes com VIH (Network of Associations of PLHIV of Guinea Bissau) (RENAP+GB)
Liberia	Liberia Network of People Living with HIV (LIBNEP+)
Mali	Réseau Malien des Personnes vivant avec le VIH (RMAP+)
Senegal	Réseau National des associations de PVVIH du Sénégal (RNP+)
Sierra Leone	Network of HIV Positives in Sierra Leone (NETHIPS)
Togo	Réseau des Associations de Personnes Vivant Avec le VIH au Togo (RAS+)

PROGRAM UPDATES

Jan 2017

Grant Agreements & Disbursement

The Global Fund Board gave ITPC final approval to support the RCTO-WA in January 2017. The program, worth over €3.6 million, will run over three years from January 2017 to December 2019. This decision by the Global Fund was eagerly welcomed by communities in West Africa who are facing unacceptable challenges getting access to HIV treatment.

“We are very excited we finally have the go ahead to support communities to monitor access to HIV treatment and services in West Africa,” explains Solange Baptiste, Director of ITPC. “It is an unfortunate reality but communities still need to monitor the nature and quality of services they are offered. This is particularly important in West Africa

where fewer than one in four people living with HIV are getting the HIV treatment they desperately need. This regional project will establish community monitoring systems to report regularly at national and regional levels. It will provide critical data for evidence-informed advocacy to help bring about optimal HIV treatment for all.”

The initial decision to fund 11 Community Observatories came in May 2016, when the Global Fund recommended ITPC for a grant. To get this final agreement, ITPC Global and ITPC West Africa underwent a thorough review of systems and pre-grant processes, and developed detailed management documents to guide and frame the implementation of the overall project. The history of each of the stages, from identification of the problem by communities, to meeting the requirements of the Global Fund is described in a recent update. “ITPC Community Observatories in Cote d’Ivoire,

Senegal and Cameroon have shown us that community monitoring leads to improved services and helps to address issues, such as interruptions to drug supplies,” says Astou Diop Chair of Board, ITPC West Africa. “Governments and health service providers are more motivated to make improvements when they know they are being watched.”

Feb 2016

Pre-Launch Implementation Planning Workshop | Grand-Bassam

Ahead of the RCTO-WA launch, ITPC and country partners gathered for a three-day pre-implementation meeting. The purpose of the meeting was to finalize the project preparations and build on planning processes started in Dakar, Senegal in December 2016. In attendance were ITPC West Africa Board members and identified focal points from the 11 countries.

ITPC West Africa also held a two-day General Assembly meeting where they nominated a new board who will oversee the responsibilities of the organization as co-principal recipient of this project. The ITPC West Africa Board also conducted the recruitment of a new Regional Director Raoul Marius Boka who will work alongside the RCTO-WA project team in Abidjan.

Left: SR focal points discuss strategies during Pre-Launch Implementation Planning Workshop



Feb 8, 2017

RCTO-WA Project Launch | Abidjan, Cote d'Ivoire

On February 8, 2017, ITPC Global, ITPC West Africa, and the 11 country partners officially launched the new Regional Community Treatment Observatory in West Africa (RCTO-WA) project. The official ceremony of the launch took place at the Novotel Hotel in Abidjan, Cote d'Ivoire, with distinguished guests and representatives from all 11 countries. Keynote speakers included Dr. Liliane Konan,

"It is important that civil society organizations continue to be involved at all levels. This initiative will contribute to the improvement of this." – Dr. Liliane Konan, Representative of Dr. Raymonde Coffie, Cote d'Ivoire Minister of Health and Public Hygiene.



Technical Adviser at the Ministry of Health and Public Hygiene, representing the Minister; Mr Adou Kouabenan, Vice-Chair of the Country Coordinating Mechanism (CCM) – Cote d'Ivoire, representing the Chair of the CCM; Professor Serges Eholie, from the Department of Infectious and Tropical Disease of Côte d'Ivoire; and Astou Diop, Chair of ITPC West Africa. The launch, which came after months of an [intense pre-grant implementation process](#), also premiered [a short film](#) introducing the project and its goal over the next three years.

"Civil society is the voice that warns and raises awareness of the real problems of people living with HIV. Everything they've done to access treatment, everything they continue to do to ensure there is no stock-out in the medication has to be supported." – Professor Serges Eholie, Department of Infectious and Tropical Disease – Côte d'Ivoire.

Feb 2017

Documenting the Story of the RCTO-WA Project

To better introduce the RCTO-WA project and its goals over the next three years, ITPC developed [a short-film](#). The film, which was shown for the first time at the launch event, follows the story of a man named Adjobi. Through his story, we learn why it's so important for communities to be at the center of treatment access issues and the need to document glaring service gaps – like stock outs.

*Top: Honored guests and speakers at RCTO-WA launch event at the Novotel Hotel in Abidjan, Cote d'Ivoire
Left: Alain Manouan welcomes attendees*



Feb & March 2017 Sub-Recipient Capacity Assessments | 11 Countries

As part of the project implementation, ITPC conducted a capacity assessment in all 11 countries with the organizations identified as sub-recipients (SRs). The capacity assessment served as a baseline from which capacity building indicators could be measured against and informed the design of the SRs capacity building plan. The assessment focused on key organizational capacity elements, including governance, financial management, human resources, programme management, involvement of key populations, and advocacy and partnerships. The capacity assessment aimed to identify the strengths and the areas of weakness of the SRs which will require close monitoring; and to identify the technical assistance needs for the



SRs as part of the organizations' capacity building.

The overall assessment process included a desk review to identify technical assistance needs, in addition to in-country assessment visits with the SRs in each of the 11 countries. During the visits, ITPC project staff and a consultant also meet with key stakeholders (eg. Chair or Permanent Secretary of the CCM) to solicit their experience about the identified SRs and its past performance. Each of the assessment areas was assigned a maximum of 25 points with a total of 200 representing the highest capacity assessment score.

After the 11 in-country assessment visits were completed, a capacity assessment report was developed for each country, which included clear recommendations to strengthen the SRs capacity and identified follow up actions. Simultaneously the SRs capacity building report and training plan was developed, with a clear timeline for implementation. This report served as a guideline for the development of capacity building trainings in several of the key areas (see further details in the sections below).

“As a country, we can derive benefits from the CTO project. We would like you to share results with us, to combine advocacy. What we're not informed about we cannot take on”. – CCM members in Ghana (pictured left with Pedro Garcia, ITPC M&E and Research Manager)



Top: RCTO-WA Project Director Alain Manouan with UNAIDS Regional Director for West and Central Africa

April 2017 Building Connections with ECOWAS and Other Regional Bodies

For the RCTO-WA, the early months of implementation have been critical for building connections at regional level – especially in positioning the RCTO as a key player for the UNAIDS Catch-Up Plan. As a watchdog and strategic player, the RCTO-WA will influence the progress towards the 90-90-90 and facilitate the access to treatment in West Africa. As such, we have engaged with the West Africa Health Organization (WAHO) during the discussion of the Economic Community of West African States (ECOWAS) regional strategy for

HIV/AIDS 2012-2016 and contributed to the validation of the major strategic axis of the new strategy 2017-2021. With WAHO, we have also discussed the contribution of civil society organizations to boost the catch-up plan for access to ARVs in ECOWAS countries, and how monitoring of the roadmap for the establishment of the ECOWAS extended regional security stock is critical.

The RCTO-WA has also engaged with UNAIDS at regional and country level to discuss collaboration for the catch-up plan; and with the Abidjan-Lagos Corridor Organization (ALCO) to discuss synergies and learning on working with key populations across borders.

April 2017 Planning for the Future – ICASA 2017

During ICASA 2017, ITPC – through the RCTO-WA project – is planning to host a Global Treatment Networking Zone, which will:

- Increase awareness of treatment access issues, including affordability, availability and optimal treatment.
- Facilitate key discussions around treatment access issues, particularly among key populations, adolescents, and in middle-income countries
- Create opportunities for discussion, consensus building, and agenda setting on key

treatment access issues – including treatment education, with a focus on monitoring, and intellectually property and access to medicines – between key stakeholders, activists and allies

It is expected that the Global Treatment Access Networking Zone will introduce treatment as an advocacy issue, helping to increase understanding of, discussion around, and commitment to efforts and best practices for addressing treatment access issues globally. Participants will contribute meaningfully to dialogue and agenda setting, as well as share knowledge and tools critical to improving treatment access, including treatment monitoring and access to medicines. The networking zone will facilitate discussion between and foster future collaboration among key

population groups, adolescents, and advocates/activists in middle-income countries.

May 2017 Governance Training | Grand-Bassam, Cote d'Ivoire

Having carried out initial capacity assessments, the three-day ITPC-led training on governance sought to review and strengthen the capacity of the board members of ITPC West Africa and the sub-recipient organizations to enable them to adequately oversee the roll-out of this project.

By the end of the training, representatives of the sub-recipient organizations and ITPC West Africa board had outlined plans to revise existing structures and operations to adopt good governance practices.



Strategic planning session during the governance training in Grand-Bassam

May 2017

Finance Training | Grand-Bassam, Cote d'Ivoire

Carried out in parallel to the training on governance, ITPC also led a three-day finance training focused on financial management concepts and reporting requirements – critical components to the operation and implementation of programmatic activities.

June 2017

Baseline Assessments | 11 Countries

Following the Global Fund Guidelines for evaluations of regional grants, ITPC partnered with APMG Health to conduct a baseline study as a key start up project activity. The purpose of the baseline study is two-fold:

1. To provide an information base from which to monitor and assess progress and effectiveness of project activities during implementation; and
2. To understand and document the current situation of target sites and capacity of sub-recipients (SRs) before the start of activities

The baseline study collected both quantitative and qualitative data using the same methodology for all 11 countries, which included a desk review to gather quantitative data; and interviews and focus group discussions for qualitative information. This exercise provided a



SR focal points from Mali and Guinea discuss the preliminary findings of their baseline assessments.

first opportunity for SRs to collect data on their own, utilizing the data collection tools, as well as their existing relationships with data sites and their own data collection methods and strategies.

The overall baseline process included:

- Determination of IRB requirements – for each of the 11 implementing countries, helping SRs develop and submit application to receive IRB clearance (where needed)
- Development of study design – articulating the study approach/methodology and tools to be used for data collection, against the project indicators
- Completion of desk review – of national and regional health data report, and relevant project reports

- Conduct of key informant interviews and focus group discussion – to gather quantitative and qualitative data in each of the 11 implementing countries. Interviews and focus groups discussions were conducted with key target groups, health care providers, and government officials.
- Production of baseline report – that summarized the analysis of the data from the 11 countries

The learning from these efforts helped to shape the M&E training (described below), ensuring it was useful and pertinent to the issues that SRs face in data collection. During the qualitative portion of the baseline study, visits by ITPC staff and APMG included a discussion with the SRs on the quality of quantitative data collected, and reported on the quantitative data

forms. Technical support and troubleshooting were addressed during the visits. Starting in July 2017, SRs will continue to collect quantitative data from all data sites and confirm or correct data from sites selected in this initial phase of the baseline study.

June 2017

Treatment Education, M&E, Communications Training | Grand-Bassam, Cote d'Ivoire

Following initial baseline data collection and the development of a beta-test version of the regional database, ITPC conducted a technical training with the program focal points from each country. The objectives of the five-day workshop were to: Provide focal points with the latest science on HIV, HIV treatment, and issues along the Continuum of Prevention, Care and Treatment (CoPCT); Enhance country focal points' project monitoring and evaluation (M&E) skills for effective and efficient

project implementation, reporting, and management of the RCTO systems and database; Provide country focal point with the M&E knowledge and tools needed to train and manage community data collectors at country level; and provide country focal points with understanding about the use of communications tool for research and advocacy.

"The talking time has come to an end. It's now time for action. This workshop has helped us clear the path that we take from here"
- Martin Ellie, RCTO-WA Focal Point, Sierra Leone

Following these trainings, the RCTO-WA implementation teams in-country will begin data collection.

June 2017

Roll-Out of RCTO-WA Database

With monitoring and evaluation at the core of this project, the development of the RCTO-WA

database was one of the most critical steps of implementation. ITPC worked with a specialized developer to map out the project database's functional requirements, incorporating the needs and limitations of each SR's context (e.g. easy of use, stable internet access); and to set up and maintain a standardized and secure electronic project database and archiving system, fit to the infrastructure and capacity of ITPC and its partners, based on pre-determined indicators and reporting requirements for the purposes of data entry/upload, data storage, preservation, and transfer/sharing.

The RCTO-WA database includes an online dashboard where SR focal points can easily enter their data monthly. The interface is available in all three of the project languages (English, French, Portuguese) and allows for the collection of scanned documents to facilitate data flow and data quality assessments.

In short, the RCTO-WA allows harmonized data to be collected from the 11 countries and available for data analysis at regional level. As roll-out of the database continues, we expect to develop exporting features to facilitate data analysis by SRs at national level.

Left: ITPC Director of Global Programs and Advocacy Wame Mosime shares best practices during the training on treatment education, M&E, and communications in Grand-Bassam.



July 2017 | RCTO-WA Gets a Brand-New Look!

To give the project a unique visual identity, ITPC has launched the new RCTO-WA logo – under the umbrella of the *Treatment Access Watch* campaign, which encompasses past community-led monitoring and treatment observatory actions led by ITPC and regional partners. The logo sets the tone for all project branding and reinforces that this is

a *regional* platform bringing together the work of 11 countries. The logo will be used in all project communications materials, official

reference documents, and online media – including the official website, set to launch in Q4 2017.



LOOKING AHEAD

In Q3, we look forward to...

- Finalizing of the baseline assessment and establishing of the database for the RCTO
- Training of data collectors and starting the data collection in different countries
 - Establishment of the Consultative Community groups at country level
 - Establishment of the Regional Observatory with the Regional Advisory Board
 - Development of the accreditation system for the CTOs
 - Developing a partnership with a regional academic institute
- Strengthening the partnership with the regional projects through the regional oversight mechanism
 - Developing a PR dashboard
 - Preparing for ICASA 2017
 - ... and much more!

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