



FINAL EVALUATION

STRENGTHENING HIV PREVENTION AMONG KEY POPULATIONS IN THE REPUBLIC OF CONGO

EVALUATOR : DR. PHILIPPE LEPÈRE - TEAM

EVALUATION DATES : DECEMBER 2022 - MARCH 2023



COUNTRY:
REPUBLIC OF
CONGO



BUDGET:
€580,524



**LEAD
ORGANIZATIONS:**
Réseau National
des Associations de
Positifs au Congo -
RENAPC

PARTNERS:
Association des
Jeunes Positifs
du Congo (AJPC),
Association de
Soutien aux Groups
Vulnérables (ASGV),
Cœur Arc en Ciel,
Union pour
l'Assistance aux
Femmes Prostituées
d'Afrique (UAFPA),
and Association
Affirmative Action
Congo (3AC)



START DATE:
01/09/2020

END DATE:
31/12/2022

THE PROJECT

Background

According to UNAIDS data, at the end of 2021, HIV prevalence among the adult population in the Republic of Congo was estimated at 3.8 % [2.7 - 5.9] and incidence at 3.80/1000 [1.87 - 8.48]. Only 25 % [18 - 39] of people living with HIV (PLHIV) knew their HIV status and only 23% [16 - 35] of PLHIV were receiving antiretroviral therapy (ART). Data from the latest Integrated Biological and Behavioral Surveillance Survey (IBBS) conducted in 2018 indicated a prevalence of 8.1% among female sex workers (SWs) and 41.2% among men who have sex with men (MSM).

Project leads and implementation approach

The project was implemented in Brazzaville, Pointe Noire and in the department of Kouilou by RENAPC, a network of 28 organizations. It worked in collaboration with the National AIDS Control Program, and the Departmental Directorates of Health Care and Services (DDSSSa) in Pointe Noire and Kouilou. HIV prevention and testing interventions were carried out by peer educators from each organization. MSM and SWs who were identified were provided with care in AJPC's community clinics, including relating to PrEP.

OBJECTIVES

Overall objective

Contribute to achieving the results of the 2019-2022 National Strategic Framework (NSF) for AIDS by reducing new HIV infections by 46% among key populations by 2022.

Specific objective 1

Contribute to increasing the percentage of MSM engaged in HIV prevention programs / receiving a tailored service package, from 39% in 2017 to 80% in 2021.

Specific objective 2

Contribute to increasing the percentage of SWs engaged in HIV prevention programs / receiving a tailored service package, from 27% in 2017 to 65% to 77% in 2021.

Specific objective 3

Contribute to increasing the percentage of MSM who have been tested for HIV during the reporting period and who know their results from 0.7% in 2017 to 59% in 2021.

Specific objective 4

Contribute to increasing the percentage of SWs who have been tested for HIV during the reporting period and who know their results from 3.5% in 2017 to 73% in 2021.

EVALUATION RESULTS

Relevance

At the start of the project, both self-testing and PrEP had not been rolled out in the country and there were high levels of discrimination against key populations by healthcare staff. In 2023, only 28% of community outreach needs were being met¹. The project appears to be very relevant in this context, particularly given the national HIV prevalence data on MSM and SWs, low knowledge of HIV status and low ART coverage, demonstrating that MSM and SWs were population groups that need to be targeted as a priority.

The project is coherent as it is fully aligned with the national strategy, targeting 97% of the MSM target and 64% of the SW target set out in the 2019-2022 NSF². In addition, the project complements interventions funded by the Global Fund NFM3 grant.

Effectiveness

Although the project's achievement of targets remained too low to achieve the expected results, the lead has been effective in introducing HIV self-testing and PrEP in the country. The lead has also set out a national HIV prevention strategy for key populations and demonstrated the feasibility of initiating ART in community clinics. Finally, the lead has been able to develop strategic partnerships with the national and departmental authorities engaged in the HIV response.

Efficiency

The budget absorption rate remains low at 84% of the revised budget. The lack of a strategic monitoring tool and structural weaknesses in administrative and financial management led to a freeze on disbursements from October 2021 to May 2022, resulting in activities being stopped during this period.

Impact

The evaluation showed high satisfaction levels among members of organizations and peer educators, as well as among beneficiaries of community services, who feel unsafe in public facilities. This project made it possible to highlight difficulties in reaching these key population groups, particularly «invisible» MSM aged over 30, has demonstrated the feasibility of offering PrEP to MSM populations as an enhanced prevention approach and has shown the importance of community outreach worker interventions in the health system. However, weaknesses in the referral and counter-referral system, disruptions to supplies, etc. have negatively impacted project implementation.

Sustainability

The project has been integrated into the Global Fund NFM3 grant and the GC7 funding request. Medium-term operational sustainability is therefore ensured, provided that the Principal Recipient allocates sufficient budget for organizations to operate and to implement their activities, because with the exception of Cœur Arc en Ciel, none of the organizations have other sources of funding.

In order to ensure political sustainability, it is important to develop a sustainability plan between RENAPC and the DDSSSa.

1. Source: GC7/GF request.

2. National Strategic Framework



Conclusions and recommendations

The external project evaluation showed that the project is highly relevant in terms of health indicators and national issues for SWs and MSM as key populations, and it is aligned with the national strategy to combat AIDS, the Congolese legislative framework and with Global Fund grants.

The evaluation looked at project effectiveness not only in terms of measuring the achievement of targets, but also considering the results in the local context. Finally, the evaluation highlighted the impact and conclusive results achieved, as well as elements of sustainability.

- Recommendations for the Ministry of Health:

Include the prevalence of papillomavirus and HIV/HPV co-infections in the next IBBS in 2024; authorize doctors in community clinics to initiate ART (as per the AJPC model in Pointe Noire); develop a national charter for quality of care and patient rights based on the one developed in the Central African Republic

- Recommendations for RENAPC:

Request technical assistance to develop a strategic plan, put in place a strategic monitoring tool, develop a gender strategy, draw up a capacity building plan in collaboration with the GF Principal Recipient, and establish a data management plan to guide data collection through to dissemination. The evaluation strongly recommends conducting an in-depth analysis of the needs of key populations in order to provide tailored differentiated services.

- Recommendations for L'Initiative:

Continue to provide technical and financial support to national organizations and networks of PLHIV, but introduce processes that are adapted to their capacity. The evaluation also suggests introducing economic evaluations in future funding.