

FINAL EVALUATION

INTEGRATED COMMUNITY PREVENTION AND INNOVATION FOR POPULATIONS EXPOSED TO HIV (PRINCIPE PROJECT)

EVALUATOR: PHILIPPE LEPÈRE - HMST
 EVALUATION DATES: JUNE - NOVEMBER 2023



COUNTRY:
 HAITI AND THE
 DOMINICAN
 REPUBLIC



BUDGET :
 €1,196,109



**LEAD
 ORGANIZATIONS:**
 AIDES

PARTNERS:
 Fondation pour la
 Santé Reproductrice
 et l'Education
 Familiale (FOSREF),
 Promoteurs Objectif
 Zerosida (POZ),
 Association Kouraj,
 Association Centro
 de Orientacion e
 Investigacion Integral
 (COIN)



START DATE:
 06/01/2020

END DATE:
 11/30/2023

THE PROJECT

Background

AIDES began its first project in Haiti in 2013 through support to establish a community-based HIV testing system and in the Dominican Republic in 2014 with a «Human Rights» project. Building on their experience of partnership with stakeholders in these two countries, AIDES developed the PRINCIPE project to strengthen HIV community services through, i) a sexual health approach with static and mobile interventions to break down barriers to prevention, testing and care, and, ii) strengthening advocacy. Project target groups: i) key populations in Haiti, such as men who have sex with men (MSM), sex workers (SWs) and transgender men and women (trans people); as well as, ii) people who inject drugs and people who use non-injecting drugs in the Dominican Republic.

Project operating model

Project implementation was not easy in the context of high levels of insecurity in Haiti, meaning the AIDES team could not travel there, and an unfavorable environment in the Dominican Republic where care provision for people who use drugs can be made difficult and sometimes risky due punitive laws.

OBJECTIVES

Overall objective

Strengthen prevention, access to care and care provision for populations most at risk of HIV, hepatitis and STIs in Haiti and the Dominican Republic.

Specific objectives

- Create/strengthen innovative community-based services for combined HIV and STI prevention & access to care, following a differentiated holistic approach to sexual health adapted to the needs of key and vulnerable populations.
- Strengthen community advocacy for the development, accessibility and sustainability of innovative health services adapted to key populations, as part of effective community approaches.
- Ensure the sustainability of innovative services put in place through ongoing evaluation and identification of funding opportunities.

EVALUATION RESULTS

Relevance

The evaluator considered the interventions were relevant in each country, but questioned the relevance of a multi-country project that did not provide cross-border support in the current context. In Haiti, it is relevant to target MSM and SWs with regard to health indicators. In the Dominican Republic, COIN is one of the few NGOs providing services for people who use drugs. The project appears to be relevant because the target groups are aligned with those included in national strategic plans and the approach it took is in line with international WHO and UNAIDS guidelines. In addition, the project complements Global Fund funding.

Effectiveness

The main area of weakness in the project was around the monitoring and evaluation (M&E) system for stakeholders in Haiti, as there was no database and review of indicators was only clarified during the sixth semester. In terms of the other expected results, the lead was effective on the training and service improvement components, and targets were often exceeded for quantitative indicators. The lead was less effective around the advocacy, monitoring, evaluation and learning and sustainability components. However, these components will have to be analyzed again at the end of the project to assess the level of achievement of the targets.

Efficiency

It is clear that the budget spend rate is excellent and expenditure is in line with the forecasts. However, insecurity in Haiti led to high inflation yet the project budget did not change, which resulted limited peer education activities.

Impact

The evaluation conditions did not make it possible to measure the impact of the project on beneficiaries in Haiti. The lack of a database meant it was not possible to measure the project's contribution to the national HIV response. However, in the Dominican Republic, the evaluation showed high satisfaction levels among health professionals, COIN staff, peer educators and beneficiaries. One notable impact area in the Dominican Republic is the creation of a peer led organization for people who use drugs / people who inject drugs. In Haiti, the Global Fund's GC7 funding request incorporates community approaches implemented by the organizations, which reflects the significant impact of the project.

Sustainability

In the Dominican Republic, COIN has confirmed that it is possible, in the long term, to provide care to people who use drugs as part of the HIV response, including distributing syringes, despite the punitive law in place. However, it will be difficult to envisage sustainability until Law 50-88 is repealed or amended to address public health issues related to drugs.

In Haiti, without further funding, technical sustainability relies heavily on the ability of organizations to keep a network of peer educators active, including covering their travel costs. In the current context, it is difficult to talk about the political sustainability of the project, while gangs rule and the government relies on the United Nations Security Council to restore institutional order in the country.



Conclusions and recommendations

In the Dominican Republic, COIN confirmed the feasibility of implementing a mobile approach outside of national guidelines by targeting people who use drugs / people who inject drugs, which is difficult in a punitive legal and legislative environment. This approach combines HIV and hepatitis C prevention, care for people living with HIV and harm reduction through needle distribution.

In Haiti, organizations have demonstrated the feasibility of i) implementing mobile HIV prevention approaches through condom and PrEP promotion, ii) providing multi-month community-based ARV distribution for PrEP and/or HIV treatment and, iii) operating a community clinic, in a context of economic, political and security crisis.

The evaluation made a number of recommendations:

To AIDES and their implementing partners:

- Establish a data management plan from the start of a project, and if necessary, seek external technical assistance.
- Reflect further on peer educator and facilitator incentives by seeking the appropriate balance between contribution to costs and remuneration.
- Initiate reflections on the feasibility of testing conducted by peer educators in Haiti.
- Rethink the multi-country approach in the current context in Haiti.

To L'Initiative:

- In future projects, include components to assess training plans, post-training monitoring and evaluate skills acquired. Same recommendation for data quality control and reliability.
- A cross-border approach to care provision for Haitians going to the Dominican Republic for treatment, and monitoring upon their return to Haiti, would be entirely relevant in the context of a multi-country intervention.

AUGUST 2025