



FINAL EVALUATION

TRAINING AND EMPOWERMENT PROJECT TO STRENGTHEN SUPPORT FOR ADOLESCENTS AND YOUNG GIRLS INFECTED OR AFFECTED BY HIV - PHASE 2

EVALUATORS: PHILIPPE LEPÈRE, SOUKEYNA OUEDRAOGO - HMST EVALUATION DATES: MAY 2023 - JANUARY 2024



COUNTRY:

BURKINA FASO, BURUNDI, CONGO BRAZZAVILLE, CÔTE D'IVOIRE, MALI, TOGO



BUDGET:

€1 317 114



LEAD ORGANIZATIONS:

SIDACTION

PARTNERS:

RÉSEAU GRANDIR ENSEMBLE, ANSS, SWAA, EVT, AMC, CSAS, ASU, ARCAD AKS, REVS PLUS



START DATE:

06/2020

END DATE:

05/2023

THE PROJECT

Background

In 2006, Sidaction implemented the "GRANDIR" project, which aimed to strengthen the capacity of health actors around preventing mother-to-child transmission of HIV (PMTCT) and supporting children living with HIV. After three phases of the project, an intervention followed entitled «Training and empowerment to strengthen support for adolescents and young people infected or affected by HIV» to enhance the skills of teams from partner organizations to provide care to adolescents living with HIV. In phase 2 of this project, Sidaction set out to develop synergies between its interventions and national programs and networks of actors working in the same field, to mobilize young people in advocacy interventions and to enhance learning around practices.

Project operating model

The project is led and coordinated by Sidaction, which works with 10 partner civil society organizations in Burkina Faso, Burundi, Congo, Côte d'Ivoire, Mali and Togo. In addition to improving support for young people living with HIV, the objective of these partnerships, for all the organizations involved, is to transfer skills from teams at the main sites to their respective local level branches.

The implementing partners supported by Sidaction are involved on two levels: management of care centers and provision of community services in line with the national task shifting guidelines.

OBJECTIVES

Overall objective

Contribute to reducing morbidity and mortality among adolescents and young people living with HIV in sub-Saharan Africa, taking into account the COVID-19 health crisis.

Specific objectives

- ► SO1: Improve the provision and quality of care and support for adolescents and young people living with HIV within project partner organizations and facilities.
- ► SO2: Strengthen collaboration between civil society organizations, the public sector and networks of actors involved in care provision to adolescents and young people living with HIV.
- ► SO3: Strengthen the leadership of adolescents and young people living with HIV and their involvement in the design and implementation of projects and programs that affect them.
- ► SO4: Disseminate and capitalize on good practices around the care, support and mobilization of adolescents.
- ▶ SO5: Strengthen protection methods and access to essential care and support services for adolescents.

EVALUATION RESULTS



The evaluators found that the project was relevant in terms of national health indicators and low antiretroviral therapy coverage among children living with HIV in West and Central Africa. Project implementing partners reached almost 13 % of the total number of children receiving antiretroviral therapy in the six intervention countries.

The project also demonstrated coherence, particularly in terms of being aligned with each country's National Strategic Plan for AIDS and UNAIDS / WHO international guidelines.

Effectiveness

Sidaction and their partners showed high levels of efficiency, with an average achievement rate of reaching target groups close to 100 %. In order to achieve SO1, Sidaction developed training tools and modules and then trained trainers and caregivers. Under SO2, collaboration between National AIDS Control Programs (NACPs) in target countries and implementing partners was strengthened or became standard practice. Participation of young people in international conferences enabled the achievement of SO3. In terms of the learning and sharing objective (SO4), Sidaction has developed a practical guide on peer education. Finally, nearly 100 % of the target adolescents under SO5 were able to access viral load testing and know their result.

Efficiency

At the time of the evaluation, it was not possible to determine unit costs, nor to assess the cost-effectiveness of the services delivered. Nevertheless, Sidaction's reports revealed high burn rates and expenditure in line with initial forecasts.

Impact

The project has demonstrated multiple noteworthy areas of impact, but perhaps the most significant is the change in the outlook and medical practice of care providers towards young people in public health facilities. For example, putting in place mechanisms relating to reducing waiting times, support groups, status disclosure, and the inclusion of sexual and reproductive health (SRH) topics in medical consultations... At the national level, adolescents were involved in writing Global Fund GC7 funding requests. At the international level, advocacy by youth ambassadors has been acknowledged and achieved recognition.

Sustainability

The project has enabled meaningful leadership to be developed among peer educators. However, this peer education network needs to be structured as a community of practice. The provision of consultations for young people should also continue, despite any changes in trained staff. There is a question mark around sustainability in terms of one generation of peer educators handing over to the next. Political sustainability is in part linked to collaborative frameworks between the NACP and civil society organizations and is impacted by systemic health system weaknesses.



Conclusions and

recommendations

The evaluation demonstrated how sustainability is key to achieving convincing results, considering that this project is a component of a long-term program that began in 2006 and continues to be supported by French funding.

The evaluation made a number of recommendations:

To Sidaction and their implementing partners:

- ► Strengthen strategic partnerships in each country.
- ► Consider the parent- child /adolescent pair in psychosocial and mental health care.
- ► Strengthen psychosocial support for peer educators.
- ▶ Foster the creation and facilitation of a «community of practice» of peer educators, to get them better integrated into public facilities in particular.
- ► Consider remuneration packages for peer education activities (not 'salaries' as such) and undertake thinking on support they are provided with and socio-professional integration.
- ► Effectively rethink the positioning and future of Réseau Grandir Ensemble.
- ► Organize national workshops to validate training modules to foster national ownership.
- ► Conduct an in-depth analysis and take stock of collaboration between the NACP and organization-based facilities.

To National AIDS Control Programs:

- ▶ Continue to lead the collaboration framework with organizations and keep adolescents and young people as a target group on the political agenda.
- ▶ Put in place a meaningful strategy to mobilize additional resources to reduce dependency on Sidaction funding.

To L'Initiative:

- ▶ Plan to assess the impact of training before the final project evaluation. In future projects, include components to assess training plans, post-training monitoring and evaluate skills acquired.
- ▶ Maintain support for projects that follow cohorts of children, adolescents and young people born with HIV, until complete elimination of mother-to-child transmission of HIV and these patients are transferred to adult cohorts.











