



FINAL EVALUATION

ACCESS TO SRH / HIV-TB INFORMATION AND SERVICES PROGRAM FOR ADOLESCENTS AND YOUNG PEOPLE AGED 10-24 IN KINSHASA

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COUNTRY:

DEMOCRATIC REPUBLIC OF CONGO



BUDGET:

€500,000



ORGANIZATION:

RACOJ

PARTNER:

JEUNIALISSIME



START DATE:

05/2021

END DATE:

08/2023

THE PROJECT

Background

The Democratic Republic of Congo (DRC) has a generalized HIV and AIDS epidemic, with infection rates among the general population estimated at 1.2 %. Adolescents and young people aged 10-19 represent 14 % of all PLHIV at the national level. Prevalence is high among young people due to a low level of in-depth knowledge about HIV and AIDS. In the DRC, young people are facing various sexual and reproductive health (SRH) issues, including a low level of integration of the minimum package of youth-friendly services into the health system, early sexual intercourse, unmet family planning needs, early marriage, early pregnancies and issues related to menstrual hygiene management.

Project operating model

The Network of Congolese Youth Associations Against AIDS (RACOJ/SIDA) are responsible for the technical and financial monitoring of the project and carry out data checks and consolidation in line with the contract and tools in place with its implementing partner, Jeunialissime (Congolese NGO that specializes in working with the LGBTIQ+ community).

OBJECTIVES

Overall objective

Contribute to improving the quality of life of adolescents and young people in Kinshasa through equal access to gender-sensitive and integrated SRH/HIV-TB information and services on human rights, sexual violence and gender-based violence.

Specific objectives

- ▶ Improve access to SRH/HIV-TB information and services for adolescents and young people, including the LGBTIQ+ community, street children, students, out-of-school youth, and young sex workers.
- ► Contribute to deconstructing sociocultural barriers that impact on gender and violate the human rights of adolescents and young people.
- ▶ Strengthen synergies between community-based facilities and case management facilities (health facilities and legal clinics).
- ▶ Provide the national health information system with a disaggregated and reliable database on the use of SRH and HIV-TB services by adolescents and young people.
- ▶ Strengthen the knowledge of adolescents and young people around family and sexual life, through support to PNEVF (the national family life education programs), in particular around sexual and reproductive health and rights and HIV-TB.

EVALUATION RESULTS



The project has demonstrated it is relevant in the DRC context. It has set out to combine several transformative approaches to improving access to health care for target populations: peer education/awareness-raising, establishing spaces for young people, partnerships with local health centers and advocacy at the national level.

Effectiveness

Results under specific objective 1 have generally been achieved. Results under specific objective 2 have only partially been achieved. The advocacy process relating to voluntary HIV testing for minors has not led to the expected results, as the law has not been amended. Although results have been very positive under the awareness component, they have not been achieved for the access to care component.

Efficiency

Project efficiency is considered to be average, taking into account the budgetary constraints and the particularly difficult implementation context (multiple strikes in the education and health sectors and multiple conflicts of agendas with state actors). The budget spend rate was 99.16% at the end of the project, which shows good implementation performance considering the results achieved by the project.

Impact

At a general level, the different beneficiary types acquired new knowledge enabling them to challenge myths and bring about changes in their behavior. These changes mainly related to breaking down social norms: community acceptance to participate in LGBTQI+ activities, increase in young people attending youth-specific spaces, etc.

Sustainability

Although skills strengthening of community actors who have been partners has been a major achievement of the project, the advocacy process around voluntary testing of minors has not led to a change in the legal framework. The absence of preferential rates for adolescents and young people, the collection system and operating youth spaces outside the project period suggest that some project achievements will not be sustainable.



Conclusions and recommendations

Overall, the level of achievement of results is mixed. There are very positive results in terms of the «awareness» component: the number of young people/adolescents sensitized is much higher than expected. In addition, the effects of these awareness sessions have already brought about changes in behavior among adolescents and young people directly reached by project activities. However, results relating to access to care (via the referral system) have not been achieved: the number of young people referred to health centers (knowns as FOSA) is lower than expected and not all referred young people necessarily benefit from the anticipated care services.

Recommendations for RACOJ:

As part of a possible phase 2, RACOJ should:

- ► Adopt a consortium intervention strategy; work in greater synergy with implementing partners (greater pooling of skills) and ensure better communication between them (strengthening and formalizing platforms for discussion and sharing);
- ► Strengthen the monitoring and evaluation system;
- Expand interventions to four other health zones in Kinshasa, or potentially in another province, while consolidating achievements in the current intervention area.

Recommendations for L'Initiative:

▶ It is recommended that other parallel support (in particular via the Expertise Channel) for the project is mobilized, with the aim of strengthening RACOJ's capacity, particularly around monitoring, evaluation and learning.









