



Global Fund Grant Cycle 7 Reporting Template

Title of Activity: Constituency Feedback Meeting/ GC7 Dialogue	Dates: 05th and 6th April Start date: 05/04/2023 Finish date: 6/04/2023
Report submitted by: Elidah Maita Organization/Constituency: Designation: Date Submitted: 15/04/2023	Telephone: +254 711 494 240 Email address: Wambuieldah@gmail.com
County: Kenya Coordinating mechanism	Activity Venue: Pride Inn Flamingo- Mombasa
<i>*Photos of the engagement</i>	



Broad Objective

To spearhead the development of a strategically focused, technically sound and evidence-based funding request for submission to the Global Fund on 21st August 2023 and support the TRP responses, Grant Negotiation, Grant Making and Grant signing process.



<p>Specific Objectives</p> <ol style="list-style-type: none">1) Engage with constituency Members and discuss the key priorities and strategic interventions to be included in the Global fund funding request application and COP 23 planning process.2) Discuss achievements, programmatic gaps, areas of improvement and lessons learned to inform the GC7 and COP 23 planning process.3) Update constituency members on EPA requirements and KCM evolution project.4) Update constituency members on the progress on implementation of GF and PEPFAR grants.5) Discuss 2022/2023 constituency report 2023/2024 work-plan/budget.
<p>Background</p> <ul style="list-style-type: none">• The Global Fund assesses CCMs through 6 eligibility requirements.• Constituency engagement is a key eligibility requirement for CCMs.• One of the Strategic objectives of the KCM is to engage constituencies and share Global Fund information transparently, equitably and accurately.• The Global Fund allocated Kenya US\$392,989,068/ matching fund USD 15 Million to continue supporting the response during the July 2024 to June 2027 implementation period.• GC7 submission window 21st august 2023. The funding request development process is currently ongoing.• Transparent and inclusive country dialogue is a key requirement during the funding request development process.
<p>Brief Description of how the engagement was conducted</p>
<p>Gaps Identified</p>



- 1) Social stigma and Discrimination- School based, Community level
- 2) Gender based Violence
- 3) Stock out of commodities
- 4) Co-infection and co-morbidities
- 5) Continuity treatment
- 6) High mortality rates among the PLHIV on treatment
- 7) High prevalence of advanced HIV diseases. 30%



Proposed Interventions/Recommendations

1. psychosocial support at community level
2. community based testing
3. support for the elderly
4. Prevention and management of co-infections and commodities
5. legal literacy- Know your rights''
6. Social protection including cash transfers and nutrition
7. community mobilization and advocacy
8. new formulation/technology of new products- Dawa, Sindano
9. reducing HIV related discrimination, harmful gender norms and violence against women and girls
10. A distinction between CHVs and mentor mothers living with HIV with a CHV training curriculum
11. NHIF for school going children
12. components of PLHIV-GBV
13. Training for treatment literacy using the tools developed by the communities
14. Caregiver capacity building
15. Integration of Mental Health
16. Capacity building for communities of people living with HIV. integrate Stepping stones + and Stepping stones with Children
17. Food security and nutritional support to be channeled to community networks.
18. Community ART distribution as form of differentiated services
19. Mentor mothers in the community not just at the facilities
20. psychosocial support at community level

DATA INFORMED COUNTRY PRIORITIES

- **Preventing new HIV infections through optimizing HIV prevention in adolescent girls and young women and achieving EMTCT.**
- **Reversing the trend in HIV related mortality through optimizing HIV and other Health outcomes in children, men and boys.**
- **Centering the HIV response and communities especially key populations.**
- **Addressing non-communicable diseases and other CO-morbidities in persons aging with HIV**
- **Prioritizing with inclusion of;**



- Treatment Literacy
- Stigma Index 2.0
- Viral suppression_ Reported that DTG has enabled increase in viral suppression
- Addressing new infections and GBV
- Service coverage retention
- Lay testing Cadres and point expansion and optimization

PEDIATRICS

Challenges outlined;

- 1. Quality HIV treatment service delivery**

Areas to evolve

- 1. Follow ups**
- 2. Way forward COP23**

Access

- Retention support
- Point of treatment service
- PMTCT outcome testing Quality

Summary of HIV testing services- highlighted strengths and challenges on stock outs.

Strengths and Challenges on HIV treatment

- Treatment cascade follow up
 - How can people living with HIV need in program design/intervention

Challenges

- TB mortality
- Compromised Health Outcomes



- Retention in HIV treatment

Areas to evolve

1. TB/HIV collaboration
2. Early and consistent diagnosis
 - CD4 instruments mapping/optimization
 - NCD screening and treatment
3. Health Care workers training
4. HIV retention
 - Decentralization
 - Mental Health
 - Food security

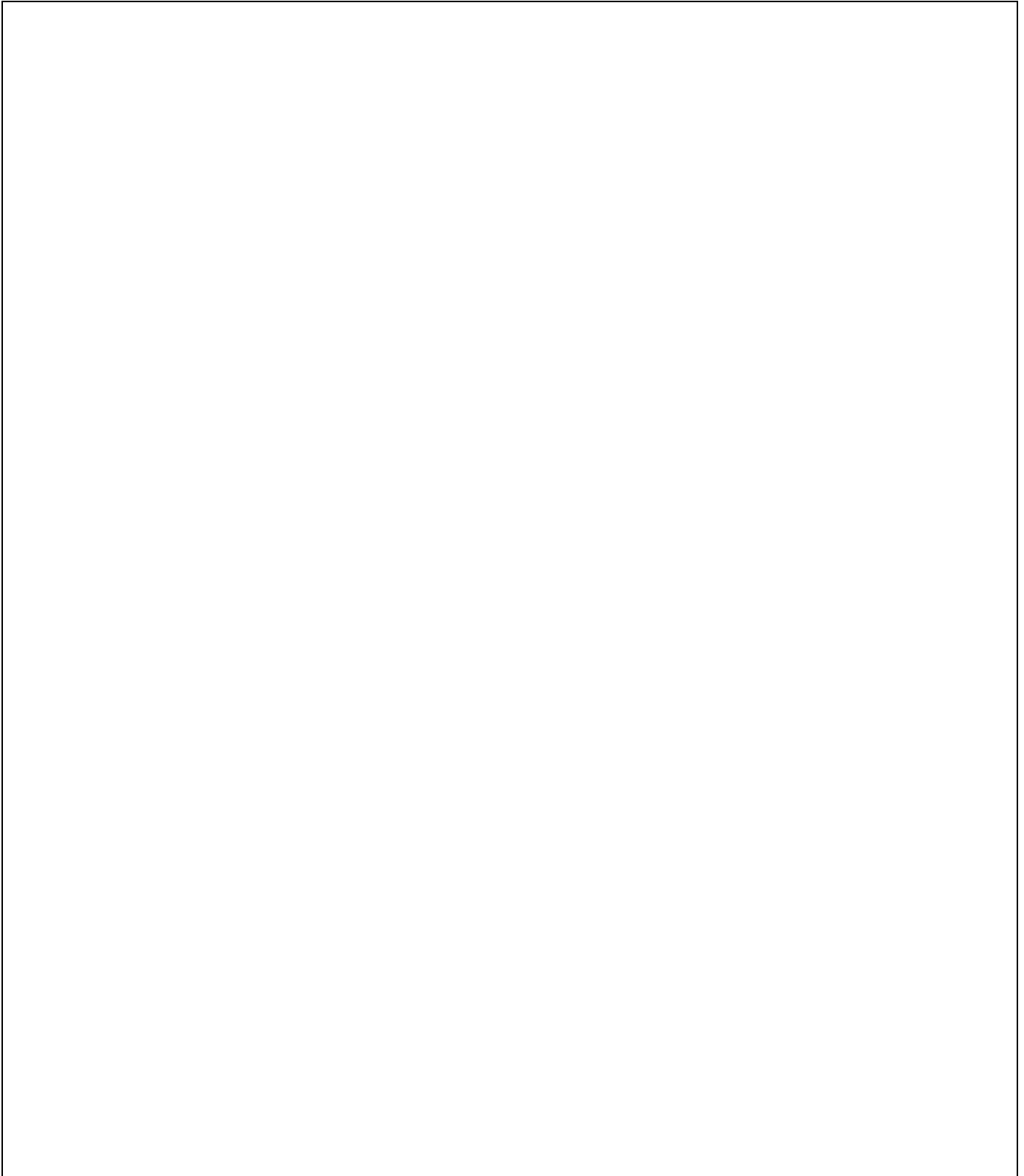
FOUR COMPONENTS OF COMMUNITY SYSTEM STRENGTHENING- Focus being on the four community led monitoring.

- Tools
- Capacity building and skill transfer
- CLM implementation
- Community led advocacy and Research (CLAR) tools
- Social mobilization building community leadership development

CONSIDERATION FOR NEXT PHASE

N.B- Intensify CLM components

- Implementation arrangement
 - Leadership and Governance
 - Key document to guide implementation
 - Key Players in the community
 - Monitoring and evaluation





Attendance Sheets for the meeting

*Pictorials

Commodity	Requirement (Demand)	Received (Receipts)	% FRI rate
Condoms (Male)	30,824,068	4,420,105	11%
HTS	211,916	81,313	38%
MSI	1,910,088	1,889,475	99%

- **Condoms:** Erratic/late supply – stock received mostly in Q2 of the semester.
- **PVEP SDPs** reported <1 MOS with significant increase of consumption in Q2.
- **MSP:** MOS – 3.7 at KRCS & 2.1 SR levels. Deliveries for 465,388 kit 1 is expected by end of Feb 2023.
- **STI Drugs:** SDPs reported an average of 4.7 MOS at the end of the reporting period.





Sub recipients supporting implementation in 47 counties

#	Organization	Counties of implementation	#	Organization	Counties of implementation
1	AMURT	Kiambu+Marsabit+Samburu	16	DUPS	Nairobi+Kiambu+Mombasa
2	BLUE CROSS	Tana T Taveta	17	OUTREACH	Mombasa+Wajir
3	CARDA	Kakamega	18	FRCP	Waji Pictal
4	CHAT	Isiolo+Lakipsa	19	RESOL	Nairobi
5	CIPK	Lamu	20	SMANO	Garissa
6	Daraja Mbi	Waji	21	St. Joseph's CBO	Muror
7	Eagle Heema CBO	Nyeri	22	TALARI	Nairobi
8	IRDO	Busia+Migori+Siaya	23	World Vision Kenya	Nakuru+Harambee+Transmara
9	KANCO	Bungoma+Wajir+Mombasa	24	YCEM	Harambee
10	XCCB	Embu+Kiambu+Mara	25	Catholic Diocese of Mombasa	Mombasa
11	KICE	Tana River	26	Hope Worldwide Kenya	Wajir+Tana+Harambee
12	KOCSHEP	Nairobi	27	Kenned Youth Consortium	Bomet
13	Makesor International	Nairobi	28	SNCP Kenya	Ryandara
14	NEPHAK	Nairobi+Vihiga	29	World Relief Int. Kenya	Turkana
15	NAK	Baringo+Elgeyo+Marsabit+UasinGishu	30	CMIB	Machakos+Malindi

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*Photos of members making presentations





**Photos of the group engagement*

