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About the Results Bulletin

The Results Bulletin is a Monitoring, Evaluation, Results, and Learning (MERL) newsletter that provides updates, news, and insights on results from CASPR activities, practices, trends, and tools on a quarterly basis.

The purpose of the newsletter is to inform and engage CASPR partners and other stakeholders about the progress, achievements, challenges, and lessons learned from CASPR initiatives. The newsletter also serves as a platform for sharing best practices, success stories, case studies, and resources related to MEL.

The Urgency of HIV Prevention: The Power of Advocates

Welcome
2022 AVAC
Advocacy
Fellows!



Ruth Akulu



Onward Chirona



Catherine Madebe



Prince Mikel Juao



Natasha Mwilu



Peter Kalleho Ntheri



Elizabeth Atieno Onyango



Lijema Somnono

The 2022/23 Selected AVAC Fellows

Well-supported advocates keep the global response to HIV on track. Effective HIV prevention depends on programs and research that are fundamentally grounded in the needs and priorities of people who need prevention most. Passionate, skilled community advocates are the lynchpin to this process. They explain the science, define priorities, hold stakeholders accountable and influence the field.

About the AVAC Advocacy Fellowship

AVAC's Advocacy Fellows Program was launched in 2009 with the goal of expanding and strengthening the capacity of civil society advocates and organizations to monitor and help shape the global HIV prevention response.

The program is guided by the belief that effective, sustainable advocacy grows from the interests and priorities of individuals and country-level organizations. The Fellows program is implemented through a close collaboration among the Advocacy Fellow, the Host Organization, and AVAC. The program selects a cohort of mid-career advocates through an application process. It provides technical and financial support throughout the 12-18-month Fellows year to complete a project on HIV prevention and global health equity.

The CASPR coalition is committed to advocacy towards policy change, and the preparedness and translation of HIV-related biomedical research through mentorship of advocates, civil society, and key populations. Engaging these groups and supporting their advocacy equips them with additional tools in their successful advocacy for HIV prevention.

The AVAC Advocacy Fellows program includes several CASPR partners who are alumni Fellows and hosts, and remain program champions. Fellows are also linked to activities across CASPR. The CASPR coalition is committed to advocacy toward policy change, and the preparedness and translation of HIV-related biomedical research through mentorship of advocates, civil society, and key populations. Learn more about AVAC's Advocacy Fellows Program [Here!](#)

How CASPR Can Utilize MEL Office Hours to Track Mentorship Program Outcomes



How can you ensure the success of your mentorship program without a reliable tracking system in place? [Sign up](#) for MEL Office Hours! MEL Office Hours offer flexibility by letting you decide when you need to participate and, or what you need to discuss!!



From Consultations to Commitment: Funding PrEP Distribution through Pharmacies in Five Districts of Uganda

Consultative meetings convened in five districts of Uganda with pharmacists played a crucial role in successfully expanding the availability of oral pre-exposure prophylaxis (PrEP) using a pharmacy distribution model that was previously only available for anti-retroviral treatment (ART). Ruth, an AVAC Fellow (2022-2023) from Uganda has been working with CSOs to expand the pharmacy model for ART distribution to also include PrEP distribution. These meetings led to committed funding by PEPFAR for the distribution of PrEP through pharmacies.

Initially, the pharmacy model only covered ART, but it was expanded to include PrEP distribution to improve access for adolescent girls and young women (AGYW). Although a policy regulation allowed PrEP to be accessed at private pharmacies, there was no financial support for its distribution, and the community's preference for accessing PrEP in pharmacies was unclear. This availability of PrEP in private pharmacies offers young people discreet spaces to access PrEP.

Ruth conducted consultative meetings in five districts with private pharmacists to get their perceptions on what it would mean for them to expand the pharmacy distribution model for ART to also include oral PrEP, and possible areas of support they would need to deliver PrEP effectively. These efforts were supported by other institutions such as the Africa Resource Centre (ARC).



Photos with AGYW and pharmacists

The ARC a research institution supporting the Ministry of Health on the pharmacy model of ART, felt that access to PrEP in pharmacies would ensure increased options for adolescents and young girls in these high HIV prevalence rates provinces. One pharmacist explained, “at the pharmacy, we prioritize the privacy of the client on ART who has been allocated to us for access, which means a client on PrEP shouldn’t be worried about confidentiality issues. We want to be part of HIV programming because this is our way of giving back to the community”. Ruth successfully led the documentation and presented the findings to the AIDS Control Program under the Ministry of Health.

The successful implementation of the pharmacy model for PrEP is significant for several reasons. First, it allows young people to access PrEP in discreet environments, ensuring confidentiality when accessing prevention services. Additionally, it lightens the workload for public hospital staff by increasing the availability of PrEP from multiple sources. It also ensures that PrEP is accessible free of charge at all pharmacies for the young people who need it most. This pharmacy distribution model is currently being implemented in 51 districts of Uganda.



Ruth presenting during the civil society meeting with MOH and African Resource Centre

The introduction of PrEP in pharmacies will commence in 10 districts after its launch in October 2023, out of the total 51 districts. The engagement of pharmacists in decision-making processes helped to identify and address potential implementation challenges, ensuring seamless integration of PrEP into existing healthcare services. Consequently, more individuals at high risk of HIV infection can now access the necessary preventive measures, ultimately contributing to the country's efforts in curbing the spread of HIV.

CASPR's commitment to equipping the advocacy space with tenacious advocates like Ruth highlights the importance of mentorship programs like AVAC's fellowship program. "Before the fellowship, I had no idea what advocacy looks like. I was unfocused and unprofessional," Ruth expressed, "with the fellowship, I got to feel what real advocacy is from identifying an issue, and following it up till it is addressed. I never imagined myself organizing and holding a meeting with different high-level key stakeholders, educating them, making them make commitments, and holding them accountable." Ruth's efforts in gaining PEPFAR's financial commitment is evidence that CASPR work is resulting in progress toward positive change.

Setting the Stage for Increased Access to HIV Prevention Services by Adolescents in Zambia

A series of engagements during the PEPFAR COP 23 meetings helped move the needle on youth priorities in Zambia. Commitments were made by the Ministry of Health (MOH) to decentralize HIV prevention services from clinics to the community, and to lower the age of access for adolescents, starting with the change from using the term "age of consent" to "age of access". AVAC Fellow, Natasha Mwila (2022-2023) leveraged the COP23 meetings in South Africa to present Zambia's youth priorities.



AVAC Fellow, Natasha Mwila, speaking at the Open Plenary during COP23

Before the COP meetings, the MOH displayed a position of rigidity in addressing youth priorities in Zambia. During the COP23 opening plenary, attendees, including representatives from Zambia's MOH, agreed that "age of access" is a more fitting language for the proposed policy change and committed to using this term moving forward. These commitments are key wins that pave the way for further progress on youth access to prevention care in Zambia.

Stigma and discrimination associated with PrEP has resulted in low uptake among adolescents in Zambia. Therefore, decentralizing HIV prevention services from clinics to community spaces is a necessary step to increase PrEP uptake and access to prevention services by adolescents. Furthermore, the term age of consent differs from age of access because the word "consent" is used generally, while "access" is specific to accessing health care, shifting the focus from parental consent to expanding adolescents' access to critical HIV prevention services.

This commitment is significant because it demonstrates the MOH's attentiveness to language, which is an important consideration when establishing policies like this one. Working to lower the age of access from 18, ensures that youth can access HIV prevention services without needing adult accompaniment.

The priorities presented focused on age of access, decentralizing PrEP from clinics to increase uptake, reduce new HIV infections, and combat stigma, discrimination, and negative attitudes about PrEP, specifically in health facilities. Natasha first presented the priorities during the opening plenary, along with other youth advocates who presented priorities for their respective countries.

The COP23 plenary is a high-profile, highly anticipated event and is attended by key decision-makers in positions to carry the work of advocates forward. Speaking at the plenary provides a rare opportunity for advocates to amplify their voices and messages in hopes of progress.

During the second week of the COP23 meetings, Natasha again joined other youth advocates to convene a youth town hall meeting to further establish and highlight Zambia's youth priorities. In attendance was PEPFAR Ambassador John Nkengasong, as well as other Zambian high-level officials, civil society organizations, and other advocates and stakeholders. Combined with the visibility of her speech at the plenary, these engagements were critical to securing the commitments from the MOH on PrEP decentralization and age of access.

Natasha chooses to advocate for youth priorities because she believes that the youth are the population that are most at risk and vulnerable to experiencing disparities related to HIV. "One thing is for sure, young people are not only facing these challenges only in Zambia, but across most African countries" states Natasha as she reflects on some of the reasons behind her advocacy work. Particularly in Zambia, HIV prevalence in adolescent girls and young women (AGYW) is almost double the amount compared to their male counterparts; therefore as an AVAC Fellow, Natasha has centered her work on DVR access for AGYW in Zambia.



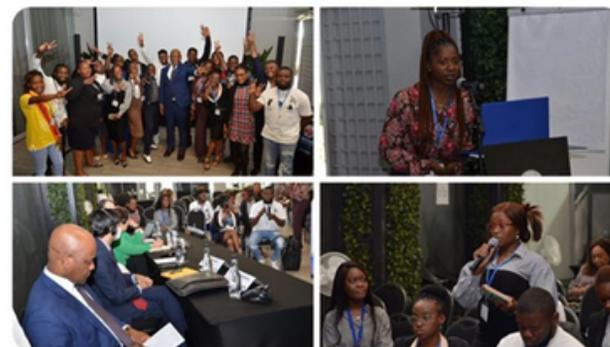
Tweet



Dr. John Nkengasong
@USAmbPEPFAR



An investment in youth is an investment in the future of the Continent. At the #PEPFARCOP2023 Youth Town Hall this morning, we discussed meaningful engagement of youth in the HIV/AIDS response as we work together to save lives & end HIV/AIDS as a public health threat by 2030.



9:57 AM · 3/8/23 · 626 Views

4 Retweets 14 Likes

A tweet from PEPFAR ambassador reflecting on the youth townhall meeting.

During her time as a Fellow, Natasha advocated for demand creation, an increase in allocated funds, and the rapid roll-out and implementation of DVR. CASPR's support of advocates through the Fellow's program is cultivating new advocates to advance community-centered approaches, both in the R&D pipeline as well as service delivery. This outcome in Zambia is representative of how intentional mentorship can result in advocacy wins for the overall HIV prevention landscape.



Breaking Barriers: How Advocacy is Promoting Inclusion of Key Populations in HIV Prevention in Malawi.

CAB for PrEP has successfully been added to the Malawi HIV Prevention Framework. Before this, cabotegravir was not part of the framework, which meant limited options for HIV prevention for at-risk key populations (KPs). This achievement was made possible through the efforts of Prince Juao, an AVAC Fellow (2022-2023), who collaborated with other national advocacy platforms in Malawi to attain this result. Prince's advocacy project focused on increasing the availability and accessibility of HIV prevention options for key populations.



Prince (AVAC Fellow) presenting to the National AIDS Council (NAC) Officials, present COMPASS Coordinator, Chisanga, programs manager for FSWs, Soko.

The first step in his advocacy was engaging stakeholders, partnering with organizations like CSAF and Female Sex Workers, both of which are KP-led organizations. CSAF, a civil society advocacy technical working group on HIV, provided Prince with a national platform to highlight the importance of including CAB in the HIV Prevention Framework.



Prince presenting at the national consultative meeting on HIV prevention

Previously, Malawi used the HIV Prevention Strategy as its guiding document for HIV prevention, which was later renamed the HIV Prevention Framework. Prince played an active role in evaluating the previous strategy, finding areas for improvement, identifying opportunities, and assessing methods for preventing HIV, including those currently being tested in clinical trials. It was during this process that the argument for including CAB as an option for HIV prevention emerged.

The addition and launch of cabotegravir as an HIV prevention option means that men who have sex with men, sex workers, and transgender persons who prefer not to take oral daily PrEP now have an additional choice. This milestone was recognized by a representative from the National AIDS Commission (NAC), who stated, "CAB LA is a game changer. In the future, we should consider CAB for treatment, as many people struggle with adhering to pills due to the pill burden."

Prince reiterated, "The fellowship gave me a status, it exposed me to a new way of thinking and has helped in the way we conduct our advocacy; before the fellowship, my involvement in the room was merely because I am a community member. Now with the application of the things I have learned, I am being involved in more spaces where my input is valued." Participation as an AVAC fellow equipped Prince with the skills, network, and tenacity to achieve this outcome.

The next steps involve designing a roll-out strategy based on evidence through Implementation Science, led by the Ministry of Health and Georgetown University. This roll-out will ensure that key populations have access to CAB for PrEP. Advocacy efforts will continue to focus on including transgender people in the implementation science study and engaging KP-led organizations in the process. This step is crucial to ensure that community-based organizations play an essential role in determining how CAB for PrEP is made available and effectively utilized by the populations it aims to benefit.

Alumni Voices: Reflections on Advocacy

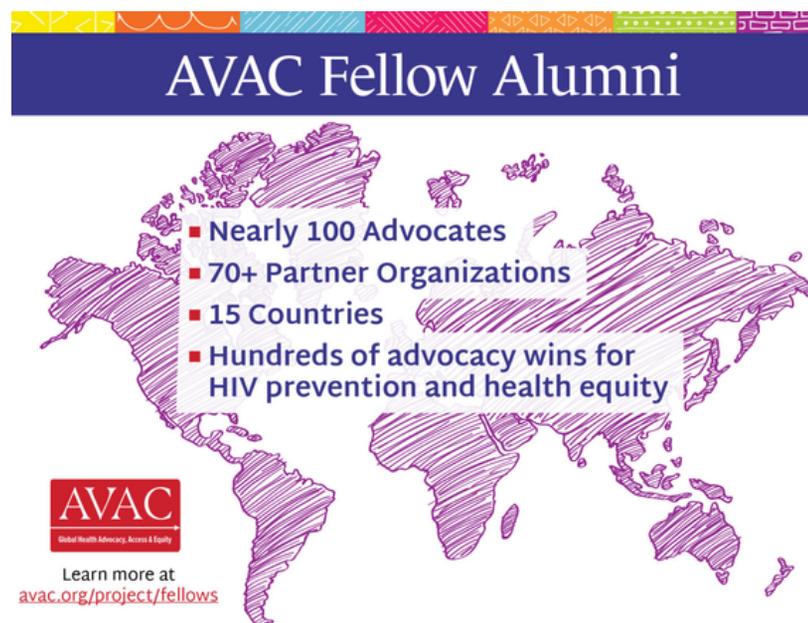
AVAC Fellows Alumni have not only found their inspiration but have gone on to make a significant impact in their respective fields. Alumni share their perspectives on advocacy and their experiences thus far. Information about fellows work can be found [here](#).

“I now realize that in order to be more effective in advocacy, there is a need to identify advocacy spaces and find your way to the decision-making table. At the same time, I have learned that to be effective in advocacy you need to build a strong coalition. This is because advocacy is in numbers.” **Clever Chilende, 2012 Fellow**

“My motivation is driven by the possibility that we can end AIDS by 2030, and that women all over the world can have prevention tools within their control, as currently they are sitting ducks for infection due to biological, social and cultural reasons.” **Anna Miti, 2015 Fellow**

“For me, to give a young person out there any chance to a better life is important and is the source of my strength to advocate for HIV prevention.” **Shakirah Namwanje, 2019 Fellow**

Celebrating the Achievements of the AVAC Advocacy Fellowship Program



Nearly 100 advocates working with 70+ partner organizations across 15 countries have participated in the program. In that time, Fellows have:

- Founded or leads more than 85 influential organizations, coalitions, and campaigns.
- Changed more than 84 national policies in support of HIV prevention or greater equity in public health.
- Won significant funding increases for more than 83 different high-priority prevention programs and projects.
- Gained approval for over 35 innovative programs (including implementation, service delivery, or community projects) and research projects.
- Led nearly 200 high-impact efforts to create an enabling environment for HIV prevention such as rallies, media placements, and research literacy initiatives.
- Served on at least 150 high-level decision-making bodies, affecting policies, programs, and funding at national and global levels.

Thank You!

It is only through the ongoing support of CASPR partners that we are able to continue and fulfill the MEL purpose.

Coalition to Accelerate and Support Prevention Research (CASPR)

