



2021

**PROPOSED KVP
INTERVENTIONS
OF C19RM
APPLICATION**

KLC

TACEF

5/7/2021

INTRODUCTION

On April 7th Tanzania received a Global Fund Allocation letter for C19RM funding award in 2021. United Republic of Tanzania has been awarded a C19RM Base Allocation of US\$88,090,579. The C19RM Base Allocation represents an amount equivalent to 15% of the applicant's 2020-2022 country allocation. It is in addition to and distinct from the country's 2020-2022 allocation but will be added to the country's existing grant(s).

To access this additional financing the Global Fund requires Tanzania to submit an ambitious and comprehensive funding request. It should outline prioritized programmatic needs requiring financing using the C19RM Base Allocation amount and beyond the C19RM Base Allocation amount. As guidance, Tanzania needs to develop a funding request for the full C19RM Base Allocation amount and also include requests for C19RM Above Base Allocation for at least US\$88,090,579, which is equivalent to a further 15% of the 2020-2022 country allocation.

Key and Vulnerable Populations (KVPs) have been the most affected. Many communities faced challenges to access HIV treatment and prevention services because of increased stigma and discrimination. Key population groups are not adequately involved in the design and monitoring of the implementation of COVID interventions. Moreover, MSM and Trans and other KVPs face double challenges of stigma and discrimination from the community when seeking community services and some of them were seen as the causative of COVID 19. This has resulted in an increase of self-stigma and further isolation of our communities. The allocation letter has been a grace opportunity for KVPs groups to be effectively represented. Issues that will be prioritized will help to shape the application on integration of Community Rights and Gender interventions in COVID 19 programs.

It was determined that holding a community consultation would strengthen the capacity of MSM, sex workers, people who use drugs and transgender groups to discuss non-stigma and discrimination priorities and strategies that will be incorporated in the next global fund application for COVID19 Request.

On understanding the context of KVPs in Tanzania in the context of COVID 19, TACEF and TANPUD in collaboration with 60 other key populations organizations, from Tanzania came together to discuss how COVID-19 has affected our communities and identify needs and priorities interventions that our communities require. Fully motivated to have effective engagement through community discussion of relevant groups to digest non-stigma and discrimination priorities to support the funding request processes, we have produced this report.

OBJECTIVES OF THE COMMUNITY DISCUSSION

General objectives

- To mobilize community groups and other high level actors among KVPs leaders and Representatives of KVPs to the country's CCM for the aim of collecting their views on how the CCM's proposal to Global Fund on COVID19 control should benefit Transgender, people who use drugs and other KVP based on their diversities.

Specific Objectives

- Development of a document comprising of views from organizations, community members and national leaders of different platforms including Key and Vulnerable Populations Forum (KVP Forum) and KVP representatives to the country's CCM.
- Development of report and validation
- Debriefing with requesting organization and guidance during C19RM funding request process.

METHODOLOGY

To ensure comprehensive knowledge is provided to all participants. Facilitator uses different approaches which includes but not limited to:

- Distributing survey questions

- Story telling
- Group discussion
- Sharing experiences from community
- Sharing practical examples
- One on one discussion
- Question and answers

PARTICIPANTS

The two days consultations brought participants from 9 regions (Mwanza, Tanga, Arusha, Dar Es Salaam, Iringa, Njombe, Shinyanga, Geita, Dodoma and Pwani) with considerations of key population and other populations at high risk of COVID. The groups were as follows:

KEY POPULATION GROUP	NUMBERS
PWID	16
Transgender	12
MSM	10
SW	8
Drivers	5
KVP living with HIV	5
Lesbian	4
TOTAL	60

Participants who filled online survey were 25 from different regions

PRIORITIZATION OF ISSUES

Key and vulnerable population groups focused on five thematic areas on prioritization of issues which includes: -

- Capacity building
- Advocacy and social mobilization
- HIV
- Human Rights and Gender based violence
- Community led Monitoring

To make prioritization more effective the facilitator used guiding questions of which the participants responded in a group work and came up with the following responses: -

General issues include:

- Fear to attend clinic due to contamination
- Stigma and discrimination due to fact that KVP are associated with COVID 19 spread
- Denial of receiving services due to lack of having protective gears
- Poor adherence to treatment due to bureaucracy processes like Mask
- Negative Attitude and misinformation of COVID 19 from the community
- Access to nutrition was difficultly caused mostly people staying home
- Eviction from landlords due to lack of rent
- Unwilling disclosure of HIV personal status
- Gender based violence
- Mental disturbance (Trauma and self-isolation)

CAPACITY BUILDING

PRIORITIZED CAPACITY NEEDED	More activities	Collecting evidences
<ul style="list-style-type: none"> • Peers led groups should be capacitated on how to take precautions in prevention of COVID-19 • Provide enough training and seminars on C19 to the Organizations and staffs • To review policies on all issues related to health and operational • Support KVP led CSOs to provide COVID19 education and adaptive information to the community (peer to peer approach) • To create community support groups through hot spots that will be providing COVID 19 information • Policy and guidelines should be translated into local language to allow people to be more conversant on the issue, especially CSOs and to peers. • Building capacity of KVP communities on how to make reusable masks, making sanitizers and other PPE 	<p>Establishing Technical response team (Community advisor linking to MOHs)</p> <p>Enhance partnership between KVP led CSOs with LGA</p> <p>Establish sustainable funds to respond to emerging cases rather than depending on one source (Resource mobilizations on COVID19 Funds)</p> <p>Raise awareness through adverts, pamphlets, brochures etc.</p>	<p>Documentation of the C19 related cases</p> <p>Circulating surveys to community to fill in</p> <p>Online community discussions and dialogue</p>

ADVOCACY AND SOCIAL MOBILIZATION

ISSUES	Proposed activities	Strategies
<ul style="list-style-type: none"> • Bureaucracy: Clients were denied access to services due to their incapacity to afford prevention materials, especially masks. This happened mostly to PWIDs and KVP PLHIV: As result of this, KVP especially those living with HIV, feared denial of access to services, leading to deterioration of their wellbeing and some of them died as a result; • unfriendly KVP services and facilities due to COVID19 fear by HCPs, as KVP's have been associated with COVID19; COVID19 deteriorated our economies and life standards, left many KVP living with HIV unable to afford costs to attend facilities; • Stigma, discrimination, GBV and inhumanity increased as COVID19 was associated with KVP groups at the community level; that increased insecurities, threats and poverty 	<ul style="list-style-type: none"> • Advocacy should done to change the circular on ART provision that should reflect the current situation. We encourage multi monthly refills • Community Refill should be considered to reach KVPs • Support KVP led groups to have friendly Advocacy and Social Mobilization Policies, • Development of Communication and Campaigning Strategy that will help to sensitize the community that "KVPs are not source of transmission. • Ensure KVP led groups are engaging in local and national platforms in relation to COVID19 mitigation, • Advocate on engagement of KVP living with HIV in HIV networking platforms 	<ul style="list-style-type: none"> • Using peers • Using online platforms • Using medias • Using Religious leaders • Create partnership with Local Government Authorities (LGA) • Using of KVP Champions

HIV

Issues to access HIV	Proposed solutions
<ul style="list-style-type: none"> • Stigma and Discrimination • Mis information • Bureaucracy • Fear associated with the attitude towards spread of C19 • Mental health challenges to HIV positive KVP 	<ul style="list-style-type: none"> • Awareness raising • Community investment –Produce reusable masks ,PPE • Advocacy to minimize stigma and discrimination • Use of KVP led groups as service providers, offering counseling, adherence support and information, even as prescriptions come via government health services. • Province of online counseling and psychosocial support

HUMAN RIGHTS AND GBV

ISSUES	Proposed activities
<ul style="list-style-type: none"> • Negative perception from large community towards sexual orientation and gender identity • Mis information of how C19 spread 	<ul style="list-style-type: none"> • Prepare Advocacy campaign to minimize stigma and discrimination in COVID 19 environment • Awareness raising • Strengthen COVID 19 Home based health care and treatment to KVP groups and community

COMMUNITY LED MONITORING

Proposed activities	Indicators	Resources needed
<ul style="list-style-type: none"> • Conduct CLM • Support KVP led CSOs to conduct community need assessment based on their context by engaging directly with the community. • Support KVP led CSOs with tools to collect information from the community including GBV, IPV and other consequences. In here, organizations can be supported with humanitarian aid funding to support victims of consequences contributed by COVID19 • Sensitization to organizations on how organizations can utilize social networks to collect evidence; this includes utilization of social media platforms 	<ul style="list-style-type: none"> • Funds available to respond on the KVP C19 • Cases raised during implementation of COVID 19 programs • Improvement of services • Availability of protective gears • Correct information provided • Strengthened KVP led organization systems of operation. • Improved design of KVP programs to respond on COVID 19. 	<p>Funds</p> <p>Technical support</p>

WAY FORWARD

- TACEF present the summary of report to the KVP Forum secretariat.
- KVP Forum submits the report to TNCM
- Develop a channel of communication to share the report with the Tanzania National Coordinating Mechanism (TNCM) and advocate to ensure these needs and responses are included in the C19MR requests.
- The KVP group has selected KVP Forum Secretariat to be the spokespersons from KVP CSOs and communities with better negotiation skills.
- Conduct weekly zoom meeting between KVP Forum, writing team representative, KVP led CSOs leaders and community on what has been incorporated in the application
- The KVP Forum will conduct online zoom meeting with TNCM secretariat on the gaps in the application and advocate for inclusion.