UNAIDS STRATEGY REVIEW:
Focus Group Synthesis template

Country: Kenya

Organizer: National AIDS Control Council (NACC)

Date of discussion: 20th August 2020
UNAIDS STRATEGY REVIEW: Focus Group Synthesis template

Please use the template to organize your feedback from the session. Please keep responses succinct and as clear as possible to ensure our synthesis is a reflection of the focus groups hosted.

You can enter your report directly into a form on SurveyMonkey: https://www.surveymonkey.com/r/3HC9Q6M

If you are not able to enter it on line you can send us a copy via e-mail strategy@unaids.org

Would you accept for UNAIDS to make your report publicly available: Yes

Section one: Information about the focus group (to be completed by host of Focus Group)

Organization leading discussion: UNAIDS Kenya Office

Date of discussion: 20th August 2020

Theme to be discussed: Kenya progress with Fast track targets

Participants (types of organizations participating):

- Faith Organizations working on HIV programmes
- Faith Leaders Living and affected with HIV

Country, regional or global focus: Country focus

Introducing the theme

Please enter the main characteristics of the theme being explored in 5 sentences (please share the presentation if possible by email)

- Challenges with implementation of current strategy – fast track targets
- What needs to be prioritized in the next 5 years?
- What are the barriers that COVID 19 has introduced in the response
- ...
# Section one: People centered response to HIV – key emerging issues

## REACHING THE PEOPLE

| What has worked well | • Reaching out to AYP to access health and support  
|                     | • Faith sector did their best to reach out to men  
| Gaps and challenges | • Reaching out to adolescent and young women that could have spiked the MTCT rate in the country  
|                     | • Supply chain of medication for PLHIV  
|                     | • Need to reach out to pregnant women on the relevance of going to seek antenatal care to prevent MTCT  
|                     | • Reaching out to rural communities with information on HIV  
| What was not done well | • Male engagement  
| What needs to be done differently | • Need for government to partner with the faith sector for dissemination of information  
|                     | • Faith sector to work with government on the area of viral load suppression  
|                     | • To see how to introduce issues of sexual reproductive health in chaplaincy  

## STRUCTURES THAT RESPOND TO HIV

| What has worked well | • National level structures working well but there is a disconnect with different technical working groups  
|                     | • Faith sector has worked well with partners at county level  
|                     | • Faith sector has a well operationalized plan of implementation on Covid 19  
|                     | • Service delivery in faith-based health institutions  
|                     | • Faith sector has worked well with UNAIDS and UNESCO. However, for other UN systems, they have not been felt by the faith sector  
| Gaps and challenges | • Idea of multisectoral approach is being challenged thus leading to targets not being achieved – UNAIDS requested to support  
|                     | • Structures at county level having no connection with the faith sector  
| What was not done well | • When faith sector is lumped up together with other state and non-state actors, especially in grant application processes, the sector does not have a voice to air out their issues and concerns  
|                     | • Faith sector’s role/goal with GF was not clearly defined thus bringing friction with other constituents  
| What needs to be done differently | • To support the faith sector and communities to document their work  
|                     | • To strengthen the capacity of the faith sector so that structure can continue to work well  
|                     | • To strengthen the faith sector at county level and connecting them with the national structure  

- To put in place structures and measures that respond to epidemics in a proper way
- Need to have separate platforms when engaging in grant application processes
- Justice system needs to be engaged in the next strategy to fast track cases of violence against women and children
- Need to think through on the social accountability/monitoring of principle recipients in the management of public resources
- Need to have meaningful engagement in decision making processes especially in the areas of social accountability of resources

### CONTEXTUAL ENVIRONMENT

<table>
<thead>
<tr>
<th>What has worked well</th>
<th>• Faith sector’s response in Covid 19 was swift</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaps and challenges</td>
<td>• Number of people have become afraid to go to CCCs to pick ARVs out of fear of infection of Covid 19</td>
</tr>
<tr>
<td>What was not done well</td>
<td>• Strengthening of community structures</td>
</tr>
</tbody>
</table>
| What needs to be done differently | • To see how to address the issue of referral letters when one is moves from a CCC in one county to the other in a different county  
  • To have a national framework on how to respond to emergencies to avoid delayed communication in the context of HIV  
  • To do a scan within the faith sector to know the kind of resources available within the sector to determine if faith-based health facilities can continue with services within an emergency  
  • To develop a strategy that will enable programmes to continue during a crisis  
  • To discuss on how capacity building of different faith communities can be done at grassroot level |

### RECOMMENDATIONS

What are the key recommendations back to UNAIDS in terms of the strategy specifically?

| CONTINUE | • Strengthening of the multisectoral response by bringing all sectors in the response  
  • Bring all sectors in the response  
  • Continue with the issue of community dialogue  
  • Strengthening male engagement programmes  
  • Putting children at the core is important |
| STOP | • To stop being reactive and prepare to give solution on issues such as SRH bill, traditional circumcision e.t.c |
| START | • Having focus on rural communities, informal settlements, youth, and indigenous communities  
  • Reporting on activities being done by the faith sector |
• Building capacity of the faith sector on how to document their interventions
• Empowering religious leaders in indigenous churches on sensitizing their congregants on HIV
• Capacity building Sunday school teachers on CSE within the religious setup that is age appropriate
• Establishing social accountability structures at community level and faith sector to be part of it
• Strengthening the capacity of the religious sector at county level by decentralizing the faith sector working group
• Operationalization of GIPA/MIPA principles within faith communities
• Having quarterly meetings between different technical working groups for better coordination
• Emergency contingency plans that include emergencies that continuously exist in a yearly basis
• Equipping ministers on how to address mental health issues in emergencies, after grief e.t.c.
• Start largely thinking on investment of relief activities