



***Reducing HIV infections and HIV related mortality among Somalis  
SOM-H-UNICEF JANUARY 2021 – DECEMBER 2023***

**QUARTERLY PROGRESS NARRATIVE REPORT**

*QUARTER ONE 2023 Narrative Report and Annexes are being submitted to UNICEF, the Principal Recipient, as part of the Quarterly Sub-Recipient Progress Report for the New HIV Global Fund Grant for Somalia.*

**Name of sub-recipient organization**

*Integrated Services for Displaced Population  
(ISDP)*

**Organization's Representative Name**

*Mohamed Mohamoud Abdi  
(HIV Project Coordinator)*

**Date submitted**

*15<sup>th</sup>-April-2023*

**Quarter Four**

*January, February, March  
2023*

**Regions**

*Bari, Karkaar, Nugaal, Mudug*

**Districts**

*Bossaso, Gardo, Garowe, Galkio*

## 1. INTRODUCTION

The GF grant proposal for 2021 – 2023 continues with prevention and testing uptake focus on people most at risk for HIV while also targeting vulnerable persons (uniformed personnel, IDPs, prisoners, young people and emerging vulnerable populations) and ensuring retention in care for PLHIV. Outreach has been found to be the most effective modality to reach these populations as they are often hidden or may not have consistent health seeking behaviour.

While the programme started under the current grant as a peer education programme, it was found during a self-assessment in January 2020 that the peers were often not peers, with the exception of the PLHIV PE. Implementation under the new grant will start with a revised training manual and training for Outreach Workers (no longer peers for vulnerable populations) to reach populations most at risk for HIV and Case Workers (still PLHIV) to reach PLHIV and their families.

Incentives have been increased with the expectation that literate, educated persons will be selected for this work and that the quality of the work, referrals, and reporting will increase. Community Conversations, an outreach discussion modality, will be used to reach vulnerable populations uniformed personnel, IDPs, prisoners, young people and emerging vulnerable populations. Community Conversation will follow a prescribed module depending on the target population. At the same time, reaching PLHIV with peers is proven to be an effective means of retaining PLHIV in treatment. The project will place PLHIV as case managers at ART facilities, and Mother Peers, women living with HIV who have gone through PMTCT to link women testing HIV positive in pregnancy to ART services and women of reproductive age to HIV testing.

To reinforce clinical support to PLHIV, the project will run a PLHIV Network which will run support groups through the case managers. Support groups will initially be held after hours at the ART centres, subject to acceptability of PLHIV and health staff. The Network will provide cash transfers for nutritional support, provide referrals, and liaise with the AIDS Commissions to provide further legal, redress and other support.

The project will work with client groups to code sign a drop-in centre at the applicant NGO's office with different days expected to be allocated to different population groups. The drop in centres will also be able to be used for broader health and social development programs where appropriate.

Quarter one Started from January, February, March -2023 that we covered in all activities to be implemented during quarter two of this HIV Prevention and case management programme in all detailed activities for the following, to increase awareness, impart knowledge and encourage behaviour change among members of that same group. We defined peer education interventions as the sharing of HIV/AIDS information in small groups or one-to-one by a peer matched, either demographically or through risk behavior, to the target population.

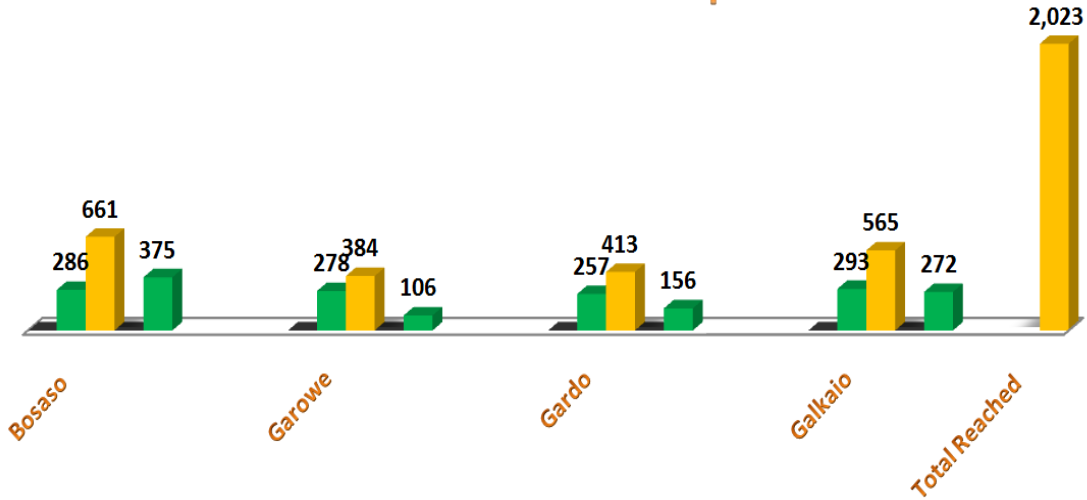
## 2. ACTIVITIES NARRATIVE REPORT (quarter results against targets)

Peer Educators in Puntland consist 31 people both female and male which is working In all 4 regions in puntland such as 9 P.E working in Bossaso,6 P.E in Gard,8 P.E in Garowe, 8 P.E in Galkaio Mudug region, Peer educators working in Puntland- Somalia had different work duties such as Outreach workers and case management, PLHIV Peer ART, Mother mentor.

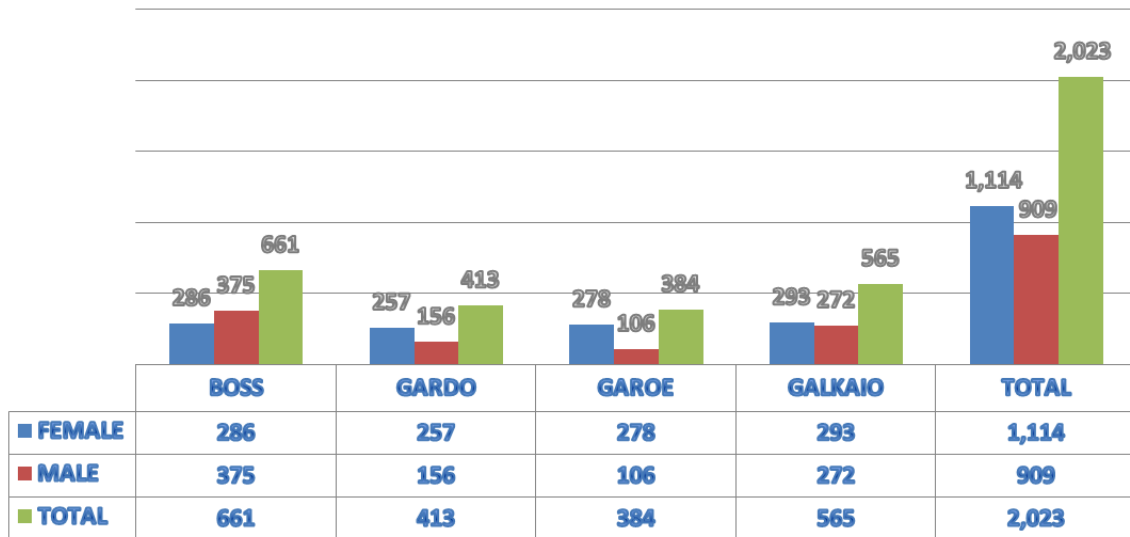
Outreach workers and case management workers who will support key vulnerable populations and PLHIVs in four districts of Puntland (Nor East Zone of Somalia) which provided HIV prevention and care programme to key vulnerable population and PLHIV in Puntland and delivery mechanism of these services including referral mechanism to other service providers outreach workers and case managers needed to help client prevent HIV infection and support clients to test for HIV and supporting people living with HIV/AIDS mitigation and reduction project aimed at key vulnerable populations and PLHIV funded by UNICEF(Global Fund) and implementing ISDP. Peer educators effectively working with different in all 4 regions in Puntland such as Bossaso,Gardo,Garowe,Galkaio, ORW/CMW which was provided data tools individual contact report designed of specific activity to provide information about the form 10 to be filled through individual contact according to the personal status of giving HIV awareness information's, GF HIV Prevention and care program of the new grant of 2021 up to 2023, ORW/CMW through using data tool report which they collect information and providing ICE/BCC Materials as per individual contact both male and female specially targeting the key vulnerable population which is most at risk in population in the society, Outreach worker and Case management worker normally working as per to be reached 30 clients per month specially ORW where by CMW/Mentor to be reported according to their availability that how many people they deal with either LFU,Art adherence, and etc, whereby ORW in each day will be contacting one person average of **Data Tool Individual contact** with different types of clients such PLHIV, PLHIV Family member, Vulnerable Women, Vulnerable men, Authorities UP and Police,PWID/Drug Users, Transport Workers, Port Workers, khat substance users, and others. HIV/AIDS awareness ICE/BCC brochures will be provided after giving HIV awareness sessions given HIVPrevention, Testing, ART, PMTCT&InfantTesting, GBV&PEP, DrugUse, Stigma&Discrimination, Rights, PositiveLiving, Partner/Child Testing, CD4 and VL, Nutrition, ART Adherence and others. **Individual data tool report** fielding by the by the outreach worker and case management workers in each region through giving as individual contact in the community telling knowledge about HIV/AIDS in each region sending Monthly summary report using data tool forum to by the also include the tool in which age disaggregation both Female and male indicated client by District.

**Quarter one Individual Data tool report total reached 2,023 in all regions such as Bossaso,Bardo,Garowe and Galkaio the total female were 1,114 and Male were reached 909 people during quarter one January,February,March 2023**

## Individual Data Tool Report



## Quarterly Individual Data Tool Monthly Summary Report



### **Activity 1.1.1 PLHIV Support Groups Monthly Meeting in 4 regions**

A PLHIV support group is a group of people living with HIV who come together to talk about the challenges, experiences and/or roles that they have in common within their society without being judged, blamed, stigmatized or isolated. Support groups often advocate for members' mutual goals and create awareness about shared challenges. This joint action leads to development and enactment of policies that better serve PLHIV and fosters supportive community environments in which group members can thrive.

**This quarter one 2023 the selected topic was ART ADHERENCE** most of the clients in all regions practices adherence of taking ARVs since this program HIV prevention and case management the key factor in effectiveness of ART in a good adherence, poor adherence clients are becoming few since continuously practice clotrimazole of this PLHIV monthly Support Group come and share ideas although these days catromozal tablet was out of stock in all ART centres, the estimations of the adherence rates on the information provided by the PLHIV about the intake of medicine during previous days and relised the advantage of taking ARV medicine continuously, Non-adherence to ART was associated with individual factors and exposure to ART. Priority measures to increase adherence to ART should aim to intensify counseling and comprehensive interventions, such as guidance for PLHIV on medication self-management skills the PLHIV life style, and improving adherence monitoring and health care services by the ART centres and PLHIV Support group monthly meeting in region such as Bossaso,Gardo,Garowe and Galkaio. In January the topic discussed of ART ADHERENCE SESSION in all regions in Bossaso,Gardo,Garowe and Galkaio **the total 75 participants of PLHIV clients Female were 56 and Male were 19 PLHIV clients.**

**23<sup>rd</sup> February of quarter one 2023 we discussed about Preventing Opportunistic Infections in HIV/AIDS** HIV attacks the cells of your body's immune system. You need a strong immune system to fight off germs like bacteria and viruses and to fight off many kinds of cancer. HIV may give those cancers or germs a better opportunity to make you sick by weakening your immune system. When germs take advantage of your weakened immune system, they are called opportunistic infections (OI).

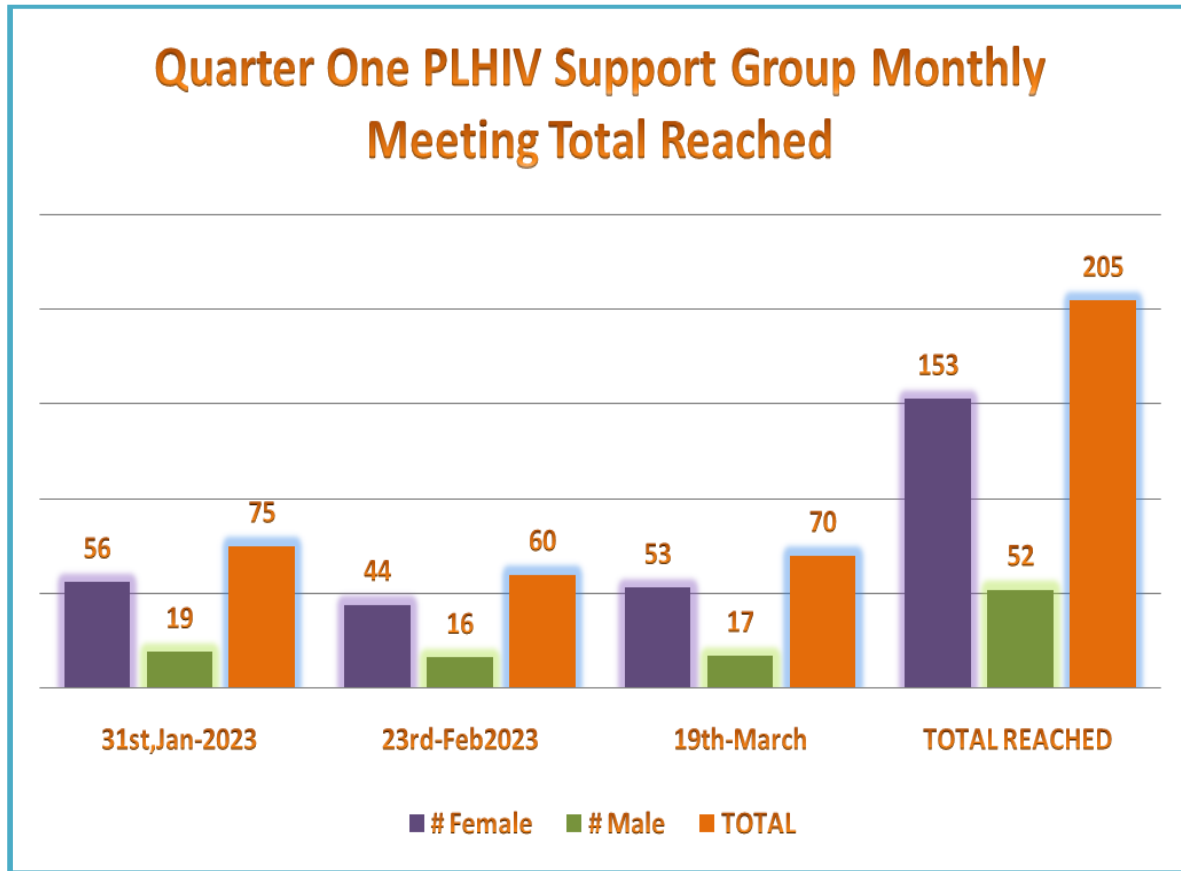
**23<sup>rd</sup>-February 2023 Discussion Topic: Prevention Opportunistic infections (OIs)** are a significant cause of morbidity and mortality in patients with HIV/AIDS. Although the incidence of OI has reduced since the introduction of highly active antiretroviral therapy (ART) Taking HIV medicine is the best way to prevent getting OIs. HIV medicine can keep your immune system strong and healthy. If you develop an OI, talk to your health care provider about how to treat it. The second of the quarter one February were discussed Prevention Opportunistic Infection of people living with HIV which selected by the ART Doctors to be participated by the PLHIV clients which is needy to get experience and advantage knowledge knowing that how to prevent the opportunistic infections while you in stage of HIV positive this session of Opportunistic infection **total participated is 60 PLHIV clients Female 44 and Male 16 participants.**

**19<sup>th</sup> March 2023 Discussion Topic: Dealing with stigma and discrimination** While stigma refers to an attitude or belief, discrimination is the behaviors that result from those attitudes or beliefs. HIV discrimination is the act of treating people living with HIV differently than those without HIV. HIV stigma and discrimination affect the emotional well-being and mental health of people living with HIV. People living with HIV often internalize the stigma they experience and begin to develop a negative self-image. They may fear they will be discriminated against or judged negatively if their HIV status is revealed.

In march 2023 were discussing with topic of dealing with stigma and discrimination monthly meeting session in all 4 regions Bosaso,Gardo,Garowe, and Galkaio the aim was of knowing that how to deal with stigma and discrimination if you in status of people living with HIV although these days stigma discrimination is not too high then before during this **PLHIV S.G Monthly meeting**

**the total participated 70 people of PLHIV clients female 53 and male 17 in all four regions.**

**Quarter one 2023 PLHIV Support Group Monthly Meeting the total clients reached 205 the female were 153 and male were 52 clients of people living with HIV which is registered with the regional ART centres.**



**Activity 1.1.2. Community Conversation Enhancement (CCE)**

Community Conversation Enhancement 9 CCE dialogue sessions take place in every Quarter of the quarter and in each quarter were targeted with different targeted Integrated Displaced population IDPs in Puntland on this quarter one 2023 from Jan, Feb, March 2023 as per our planned in our work plan community conversation enhancement CCE Sessions will be reached maximum number in each session per 40 participants per session during implementation of this Quarter one 2023 took part in all 4 regional M&E PAC commission supervision how we reach through the target group of Community Conversation Enhancement Dialog which occurs quarterly based on with reaching with different sectors of society to give HIV/AIDS so we selected and realized that IDPs are most risk population in the society which one of the Key risk population and they needed more awareness of HIV/AIDS knowledge. The importance of a human rights approach to HIV/AIDS in the context of internal displacement and, in particular, the issue of access where service provided such as VCT

Centers in all regions should be provided the essential HIV prevention, treatment, care and support services.

Also the IDPs and other host community should know where they can get free service of HIV/AIDS Counselling and test in each region, some knows some don't which neglected accessing those service HTC is providing internally displaced people (IDPs) with assistance and protection. This right entails non-discriminatory access to services which are equivalent to those available to surrounding host communities. In terms of HIV and AIDS, in order to respect and fulfil the right to the highest attainable standard of physical and mental health States must take steps towards realizing access for all to HIV and AIDS prevention, treatment, care and support. This would necessarily include antiretroviral therapy (ART).

It was to Understanding better the socio – cultural dynamics that affect HIV & AIDS) was learned and discussed underlying causes behind the spread of HIV/AIDS and how the Somalis culture reflecting this problem with open discussions, brain storming and storytelling. Session on VCT services that available and advantage of HIV test also discussed.

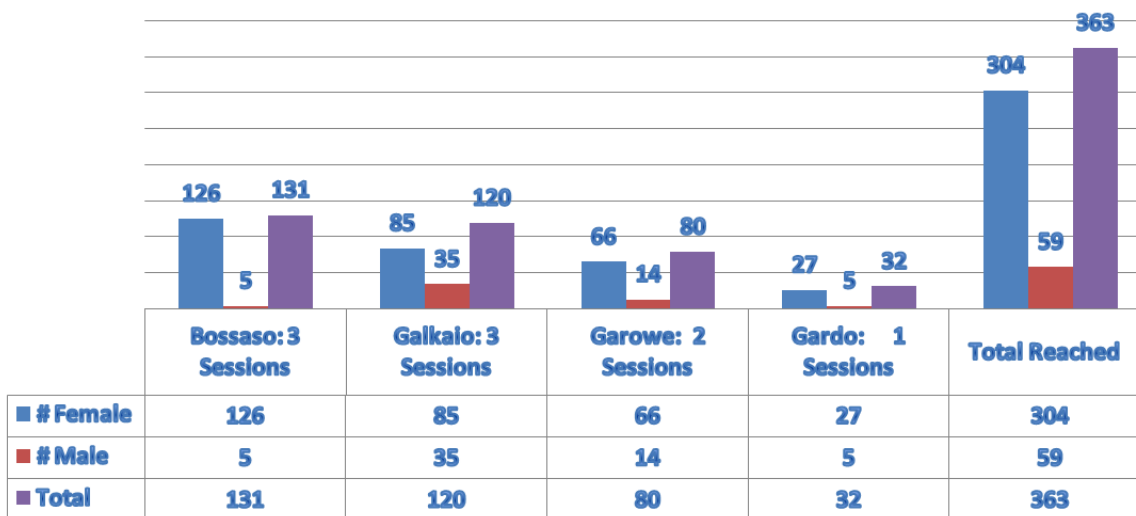
Community conversation is envisaged as a significant way to address and strengthen community participation in raising awareness of the problem and fighting against HIV/AIDS in Puntland-Somalia. Therefore, promoting and improving the implementation of community conversation is a practical means of involving the community about HIV/AIDS awareness, prevention and control methods. However,

the knowledge gap is found at how and to what extent the CCE Sessions implementing in all 4 regions Bosaso,Gardo,Garowe and Galkaio Mudug region has been raised quarterly HIV/AIDS awareness sessions of prevention and control strategies,**9 CCE Sessions The total number reached IDPs targeted in all regions 363 participants such as Bossaso, Gardo,Garowe,Galkaio the total reached female 304 and Male 59 participants of key vulnerable people IDPs.**

**Quarter One 2023 9 CCE Sessions Detailed and Target Group IDPs in Puntland-Somalia**

3 CCE Sessions Bossaso Bari Region				
S/N	IDP SITES	# Female	# Male	TOTAL
1	100ka Buush IDP Camp	48	1	49
	Toora Boora IDP Camp	39	1	40
	Tawakal IDP Camp	39	3	42
		<b>126</b>	<b>5</b>	<b>131</b>
3 CCE Sessions Galkaio Region				
2	IDP SITES	# Female	# Male	TOTAL
	Samawade One IDP Camp	30	10	40
	Samawade Two IDP Camp	30	10	40
	Buulo Agoon IDP Camp	25	15	40
		<b>85</b>	<b>35</b>	<b>120</b>
2 CCE Sessions Garowe Nugal Reigion				
3	IDP SITES	# Female	# Male	TOTAL
	Jilab IDP Camp	35	5	40
	Washintoon IDP Camp	31	9	40
		<b>66</b>	<b>14</b>	<b>80</b>
1 CCE Sessions Gardo, Karkaar Region				
4	IDP SITES	# Female	# Male	TOTAL
	Shabeele IDP Camp	27	5	32

**9 CCE Sessions Implementation Process Targeted IDPS in Puntland**





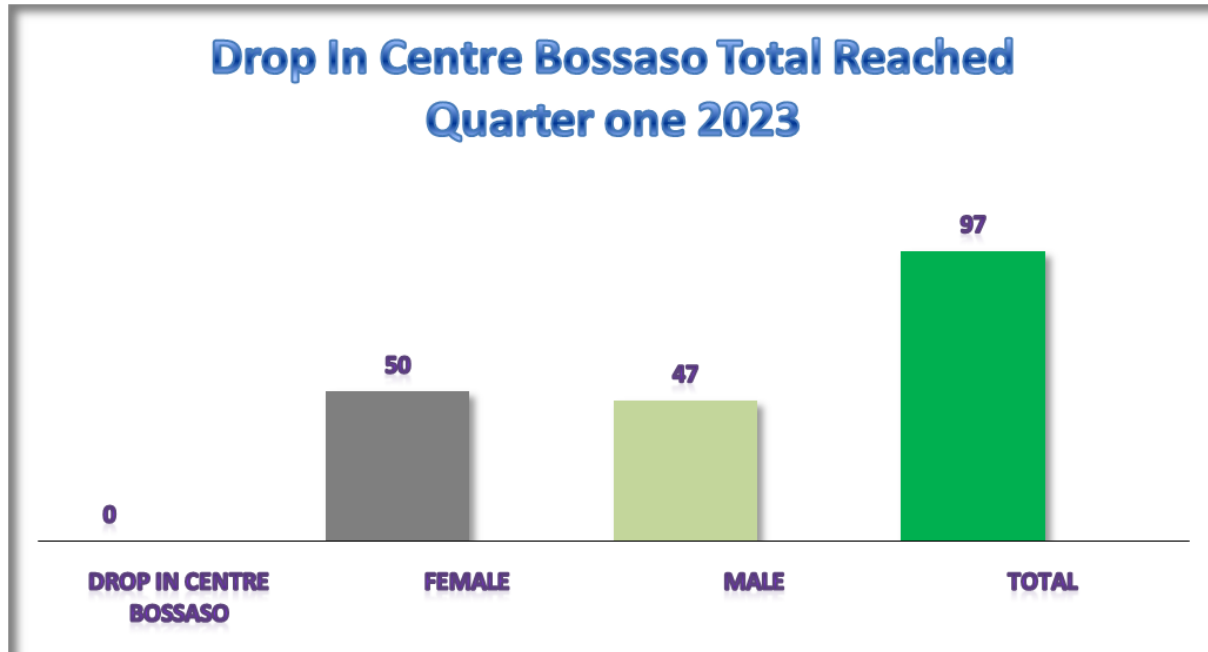
**Activity 1.1.4. Drop in Centre office Bossaso:** Drop in centre is safe space to be used for the facilitation of HIV Prevention and care management of targeting with KVP and PLHIV can easily access and seek services as per their specific needs, but mostly visited clients are Key vulnerable Population and other most at risk population such as Vulnerable women and vulnerable men,

Drop in centre it should be a place where the clients feel secure from potentially threatening person such as the Police, etc and ideally it should be also have premises where services specially STI treatment, could be provided and its accessible with all the necessary facilities conducting project activities a anon threatening place, drop in centre friendly environment,

Mainly prevention information sessions and HIV testing for KVP provided and adherence and other psycho-social support for PLHIV, and appropriate referrals from ORW/CMW sending the KVP to the drop in centre. Drop in centre officially operating service delivery mostly with KVP population where by PLHIV clients coming in the drop in centre are less than KVP populations which easily access to seek services of their status Drop in centre people adopted with different community sectors specially PLHIV clients and other key vulnerable people such as youth well in the society to visit such places to receive guidance and counselling of people living with HIV/AIDS and most at risk populations MARPS and key vulnerable population in the community,

Drop in centre people are getting used move of getting adopted to come in order to receive guidance and counselling services in every each time coming in drop in centre to find service provided those who fear to go VCT and seeking for HTC will be simply and coordinate both VCT and Drop in centre activities.

For this quarter has done with in different activities but still had a proper Data tool report and referral into VCT and other service delivery to VCT centre somewhere This **Quarter one from January, February, March 2023** drop in centre activities reached mostly connected to the drop in centre PLHIV those who are taking with monthly Nutrition food in Bossaso receives with **The Drop in centre Quarter one 2023 January, February, March 2023 the total both KVP and PLHIV were 97 people were 50 female and 47 male**



#### Activity.1.1.5

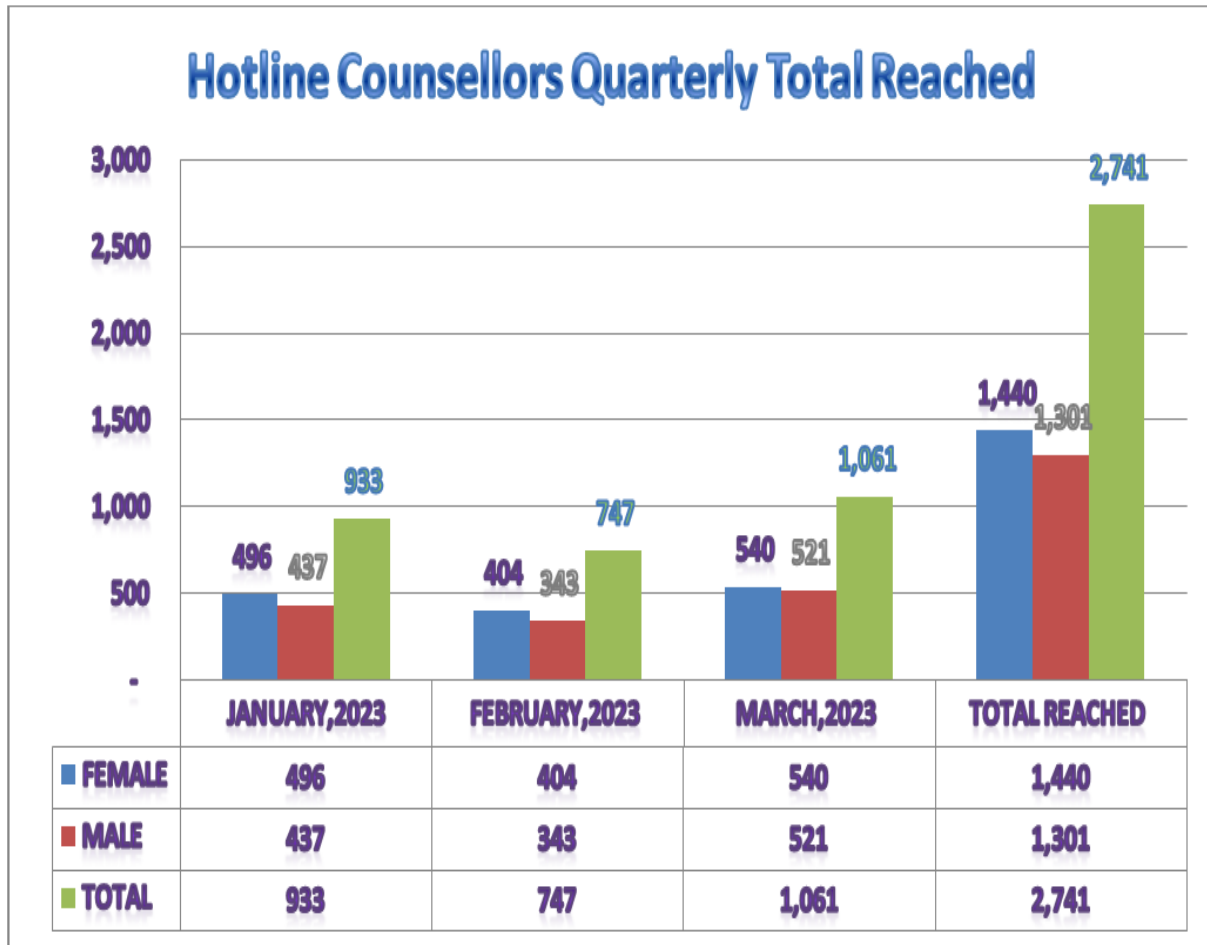
**Hotline counsellor provided free line no. 311:** The specialised telephone operating Service of guidance and counselling in all coverage in puntland-Somalia The hotline counsellors office in Garowe operates 3 counsellors in full duties shift to receive telephonic calls in all over the regions in Puntland as we developed since we started this program of HIV Prevention and Care Management programme hotline no. does not have any way to recognize it for free hotline service provided free counselling and referrals so that we managed to develop and whenever you call 311 you will be receiving in full information about the hotline no.311 and service it make available services instead of understanding that this 311 no. is not for Golis service no.

Also we promoted to be recorded as calling message in all peer educators working in all regions on top their number of hotline no.311 to know their family and friends about this no. and message so that to connect either in drop in centre Bossaso also to be directed or give information about Hotline 311 and service provided,

The three hotline counsellors working duties and operating hours is full time actually morning shift ,afternoon shift, and evening shift through hall night if you call it should received the calls 24/7 Additional promotional activities will also be undertaken to promote the hotline services particularly in high priority settings such as ports, border crossing points, youth programs, IDP camps, urban and rural areas settings etc. Outreach workers and case management also promotes activities will also provide referral mechanisms to the hotline services. Services provided with include counselling, information, referral etc.

Hotline counselling centre is source of information service for all coverage in puntland, Somalia the service providing hotline counsellor through receiving calls and responding calls of information and refer callers to the services, The purpose of this hotline telephone is to create a platform of awareness about HIV prevention and Covid-19 awareness to provide up to date accurate information and counselling on HIV/Covid-19 and referral services the hotline currently running with three counsellors to allow for expanded operating hours.

Additional promotional activities in high priority sittings such as IPDs camps urban setting and hot line telephone working properly and available very time through calls. Hotline counsellors is effectively collaborating with the ORW/CMW workers in order to increase and referral though hotline no.311 after they give counselling, they record in every calls they receive after giving the client's needs and service provided. **The total reached Quarter one from January, February, March 2023 in all were reached 2,741 people the total female 1,440 and the total male 1,301.**



**Activity 2.1.1: Quarterly Nutritional Support list of 100 PLHIV clients in 4 regions in puntland working VCT Centres such as Bossaso, Gardo, Garowe, and Galkaio.** HIV Prevention and Care management Project 2021-2023 will be supporting PLHIV clients and providing Quarterly Nutritional support of people living with HIV/AIDS clients with registered regional ART Centres in Puntland Somalia and the ART centres categorised with selection according to four categories such as.

- 1) **Clinical Determined by ART doctor, selected 29 PLHIV Clients.**
- 2) **Pregnant/lactating Mothers selected 26 PLHIV Clients in all Puntland.**
- 3) **Household with children having lost one or both of their parents, Selected 16 PLHIV clients in total all regions.**
- 4) **Elderly or Disabled HIV positive. Selected 29 PLHIV clients in Puntland.**

Above the Categorisation system and their selection in the total of 100 clients which provided quarterly Nutritional support per quarter People living with HIV which malnutrition's status measurements can be provided data for clinical staging and can be identify they type of patients of high malnutrition whose health status my benefit from the nutritional support per quarter of data tool reporting of PLHIV clients of malnutrition status of clients with the regional ART Centre of recommending according to category selection of PLHIV clients which is undernourished, information to assess the impact of their needs,

GF HIV prevention and care management programme to provide malnutrition of people living with HIV and track program nutrition interventions are improving PLHIV nourished clients status, Selection under process with the regional ART centres sorting out the most vulnerable of PLHIV malnutrition in each quarter randomly with selection of the client status from in all regions such as Bossaso ART Centre, Gardo ART Centre, Garowe ART Centre, Galkaio ART Centre,

These designed with range of regional ART's reporting PHIV clients could not be the same in all regions according to number of their register as regional label. Unicef set standard procedure according to the PLHIV clients in each region the system of PLHIV clients in each region distributed of 100 malnutrition clients to receive money which is included of providing in each end of the quarter during implementation of this HIV Prevention and care project will be receiving Nutritional support money of \$40 dollar per client of 100 people living with HIV which malnutrions selected by the regional ART Doctors such as: **Bossaso 30 clients, Garowe 30 clients, Galkaio 30 clients, Gardo 10 clients,**

**Activity 2.1.2. Quarterly Performance Incentive of peer educators:** Performance Incentives is a way of motivating the team members according to their commitment and their performance of work of their data tool report of doing extra ordinary work to be getting end of the quarter incentive performance money for encouragement are *four categories selection such as:*

- 1) *Vulnerable Women of number referred and tested,*
- 2) *Vulnerable men number referred and tested; on this quarter 8 peer educators were successes incentive performance to be selected 8 of them.*
- 3) *PLHIV Case Management: number of LTFU lost follow up clients brought back into treatment,*
- 4) *Facility Based PLHIV peers and number retained on treatment over the quarter (Mother mentors to focus on women and PLHIV PE on men),*

**Quarter one from January, February, March 2023**, This quarter one 2023 Incentive Performance categorised according their performance their monthly data tool report comes from data tool report of defined indicators to be reaches target populations of result of data gathering and combining in total and result feedback which was collected from in regions ORW/CMW/MOTHER MENTOR/PEER ART/ 31 Peer educators randomly get incentive performance and selected of their reporting tools from in all regions in Puntland Bossaso, Gardo, Garowe, Galkio of project implementation received **Performance Incentive received of 25 outreach workers and case management workers female 14 and male 11 with this Quarter one from January, February, March 2023.**

- ❖ **Promoting Referrals uptake:** peer educators outreach workers and case management Take their role of promoting referral uptake of HIV TEST AND COUNSELING also they provide OraQuick Test of self test kit most at risk population such as youth, University students Truck drivers, Chat sellers to know their status as for their confidential test by using self test kit and the workers took full participation of enhancing of HIV Test and Counselling in all regions of reducing of increasing HIV infection in the society to protect and reduce the risk of transmission Also peer educators outreach workers took full participation of enhancing of HIV Test and Counselling in all regions of reducing of increasing HIV infection in the society to protect and reduce the risk of transmission. Oraquick self test kit through peer educators and drop in centre Bossaso Quarter one 2023 **total reached 52 people female 37 and male 15 and good thing all are negative.**

### 3. MEANS OF VERIFICATION, COORDINATION, MONITORING AND EVALUATION

**Activity 2.1.3.** Quarterly field supervising in all regions of program implementation process is going on such as Bossaso-Bari, region Gardo-karkaar region, Garowe-Nugal region, Galkaio-Mudug region, field supervision is important to observe on their activities of community awareness the project coordinator or field officer they have the ability to monitor the quality of services of the community awareness of HIV/AIDS provided either were reached properly or not or data tool report were fake result of evaluation of their collective information, data tool report forms, and other data from the periphery to feed into the implementation program activities.

Field supervision of HIV PREVENTION AND CARE MANAGEMENT PROGRAM should be supervised quarterly based in every 3months during in the quarter shall include responsibility for determining competence of special inspectors for the work they are authorized to inspect and monitoring the inspection activities at the jobsite to assure that the qualified inspector is performing his or her duties when work requiring inspection is in progress.

While monitoring should be an integrated activity conducted from the detailed monitoring and evaluation needs of individual HIV Prevention and Care Management and made vulnerable by HIV/AIDS. Some of the indicators may remain relevant at the level of monitoring and evaluating a specific intervention by one community-based organization, but they will certainly not cover the full range of project monitoring and evaluation needs. Also, at project/community level the indicators will probably need to be adjusted to the situation of the beneficiaries and the response for specific communities for which an intervention is programmed.

Monitoring and Evaluation Reference Group It complements other indicator guidelines on monitoring and evaluation related to HIV/AIDS (HIV prevention and case management program targeted the key vulnerable population such as Police, Unifirmed police, university students, prisoners, key vulnerable populations and etc.

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The concept of supervision has evolved of supervising regional peer educators to supervise on their field visited workers to audit performance of Data tools individual contact their supervisory activities were primarily administrative, Quarter 4 supervision overview supportive supervision is a process that promotes quality at all levels of the regional peer educators working in the fields' collection data tool report strengthening relationships within the system. ORW/CMW Supportive supervision is a process of guiding, monitoring,

ORW/CMW supportive supervision guidelines similarly describe supportive supervision as a process which promotes quality outcomes by strengthening communication, identifying and solving problem, facilitating team work, and providing leadership and support to empower health providers to monitor and improve their own performance.

Supportive supervision involves directing and supporting to the team Outreach workers and Case management workers in order to enhance their skills, knowledge and abilities with the goal of improving health outcomes for the patients they manage.

**4. PLANNED ACTIVITIES FOR NEXT QUARTER TWO April,May,June 2023**

**Project Title:1: HIV prevention and care management in Somalia**

OUTPUTS	ACTIVITIES	TARGET GROUP	Quarter Two: 2023											
			April-2023				May -2023				June -2023			
			W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W3	W 4
Output 1.Populations most vulnerable to HIV and people living with HIV are reached with prevention outreach services.	<b>Activity 1.1.1.</b> PLHIV Support Group Monthly Meeting in Each region such as Bossaso,Gardo ,Garowe and Galkaio per one session in each Month.	support groups are fundamental to the overall well-being of PLHIV through advocacy, stigma reduction, psycho-social support, etc. support groups are key players in the delivery of PLHIV support, prevention and BCC information, treatment adherence, advocacy, and stigma reduction efforts (community and health facility based).												
	<b>Activity 1.1.2</b> Community Conversations Enhancement 9 CCE Sessions with key vulnerable populations Will be targeting <b>Quarter 2 April, May, June 2023 with University Students</b>	Vulnerable Populations including uniformed personnel, IDPs, <b>university students</b> , etc. are used to reach vulnerable populations uniformed personnel, IDPs, prisoners (community conversations conducted particularly in high risk areas such as border crossing points, ports, trade routes, IDP camps and existing higher prevalence areas.												

	<p><b>Activity</b>  <b>2.1.1:</b>                  Supervision of KVP-PLHIV Outreach Programme</p>	<p>KVP outreach and PLHIV outreach Supervision Programme Field supervision of HIV PREVENTION AND CARE MANAGEMENT PROGRAM should be supervised quarterly based in every 3months during in the quarter shall include responsibility for determining competence of special inspectors for the work they are authorized to inspect and monitoring the inspection activities at the jobsite to assure that the qualified inspector is performing his or her duties when work requiring inspection is in progress.</p>										Q U A R T E R L Y			
<p><b>Output 2:</b>  <b>People living with HIV are supported through facility-based and outreach case management.</b></p>	<p><b>Activity</b>  <b>2.1.2.</b>                  Quarterly Nutritional Support for PLHIV the nutritional support per quarter of data tool reporting of PLHIV clients of malnutrition status of clients with the regional ART Centre of recommending according to category selection.</p>	<p>HIV Prevention and care Program 2021-2023 PLHIV Clients with HIV Positive provided cash transfers through process with the partner ISDP for nutritional support, provide referrals, and liaise with the AIDS Commissions to provide further legal, redress and other support. The Field Officer responsible for allocating nutritional support to PLHIV meeting the established criteria.</p>										Q U A R T E R L Y			





Supportive supervision guidelines similarly describe supportive supervision as a identifying and solving problem, facilitating team work, and providing leadership and support to empower Peer educators to monitor and improve their own performance. It is an ongoing relationship between health care workers and ART centers which is providing and helping service to achieve work objectives by improving their performance as a regional team of peer educators also ensuring uniformity to set standards, identifying problems and solving them in a timely manner, making a follow-up on decisions reached during previous supervision visit, identifying staff needs and providing opportunities for personal development and reinforcing administrative and technical link between high and lower levels.

The overall aim and purpose of quarterly field supervision to monitor with the field team working in four region in Puntland such as Bossaso, Gardo, Garowe and Galkaio of regional implementation activities to assess and track, if there's any gaps, or challenges and constraints of their work or other way forward ideas to be improved about HIV Prevention and Care management Project program.

supportive supervision is a process that promotes quality at all levels of peer educators weather its CWs,ORWs,PLHIV Peer ART,Mother Mentors,etc working into 4 regions such as Bossaso,Gardo,Garowe,Galkaio by strengthening and updating in the situation of program implementation process focusing on the identification and resolution of problems in the field work and promoting the team and encouraging and working as a team work,

## **6. CONSTRAINTS AND RECOMMENDATIONS**

### **Challenges**

- Case management workers challenges of Transportation of cost charges by the Trucks of ARV medicine of PLHIV clients staying in urban country which can't avoid coming get their medicine.
- Individual contacting of DATA TOOL REPORT HIV/AIDS awareness causes problems when you ask the client on HER/HIM full name and contacts especially in Galkaio mudug region is more sensitive with causes of conflict of clan partition.
- ORW/CWs when they are given awareness and promoting referral uptake we spend money in our pocket for TAXI go and back also through testing by the volunteer HE/SHE feels distress during testing of HIV/AIDS or even misunderstand in the process system for example if the needle was new or not even can be effected through in the processing so many misconception occurs also is IS THE BIGGEST CHALLENGES WE FACE AS ORW/CWs.
- Observing during supervising in Galkaio was unable to determine the reasons the community in Galkaio led to increases in misinformation and stigma surrounding HIV.
- HIV-infected individuals, this may have inadvertently worsened HIV-related stigma in the community especially in Galkaio mudug region.
- Wrong perception or announcing or mentioning such as HIV/AIDS Topics which is most of the community in Galkaio had a wrong attitude telling about it which related high stigma and discrimination in the community Galkaio mudug region
- Still Poor coordination between with peers and VCT Galkaio.
- Poor confidentiality ethics result by the client if He/She become HIV Positive in both public and private sectors hospitals, pharmacies and laboratories centres

## Recommendation

- ❖ Include training police policy procedures voluntary counselling and testing in all public and private sectors.
- ❖ To simply work it needs to upgrade and to find electronic micros/IPAD of collecting data tools report used by Outreach Worker and Case management workers.
- ❖ Awareness raising purposes to be developed and prepared Audio visual.
- ❖ Increase salaries in all program staff and ORW/CMW of peer educators according to high inflation.
- ❖ To bring Policy and procedures by the stakeholders and government should take action of high Stigma and Discrimination reduction about spreading about the rate of HIV in Somalia especially in Puntland.
- ❖ CCE session expending into monthly based instead of quarterly based in order to reach and cover more areas with different community sectors.
- ❖ Yearly Review meeting evaluation meeting ORW/CMW in each 2<sup>nd</sup>,3<sup>rd</sup> year of the program by sharing experience, challenges, key gaps, way forwards and also strengthening of capacity building internally of peer educators.
- ❖ Income generation program support for PLHIV clients will improve their social wellbeing and their psycho-social support and strengthening of health condition.
- ❖ To mobilize and mandatory training kit of HIV/AIDS in all line ministers of Puntland Governmental staff
- ❖ Increase IEC materials tools that are used to transfer the knowledge to target audience to assist promoting positive behaviors.
- ❖ Reduce host community fatigue from multiple assessment missions repeated by separate.
- ❖ Use of mass media and printed publications for informing of the public Ministry of Social Affairs, local governments
- ❖ Reduction of prejudices, discrimination, and violence directed towards people living with HIV
- ❖ Community Conversation Enhancement CCE awareness the major aim of this CCE awareness is to raise the awareness related HIV/AIDS, and to introduce the community about the HIV related knowledge, such like, transmission method, prevention method, its treatment, PMTCT,
- ❖ stigma reduction to PLHIV people, awareness by giving our community the rightful information about HIV/AIDS though CCE dialogue which means
- ❖ Reducing the fearful perception about this HIV/AIDS and its creates for PLHIV people to live under their community with dignity and to recognize them as a member in their community.

**7. ANNEXES – as applicable**

**Annex 2.1: CCE Session Pictures Bossaso**



**Annex 2.2: CCE Pictures Galkaio**





**Annex 2.2: CCE Pictures Gardo**

