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INSIDE THIS ISSUE:

FEATURE	
Systems Strengthening as an Imperative for Sustainability and Ownership	1
SHiPS Project Marks its Territo- ries with Messages One Site at a Time	2
Celebrating Zero Discrimination Day	3
Increasing the critical Mass of Grassroots HIV Counsellor- Testers	4
SHIPS M&E Supports Develop- ment of SACAs	5
Collaborating for Development	7
SHIPS STORIES	
Rediscovering Hope	8
USEFUL INFORMATION	
Use of Synthetic Antibodies against HIV in Humans Shows Promise	9
Announcements	9
STATISTICS	
Data on SHiPS HIV Counselling and Testing Service	10
TRIVIA	
Answers to Issue 1 Trivia	11
Issue 2 Trivia	11

FEATURE

Systems Strengthening as an Imperative for Sustainability and Ownership

Building systems involves ensuring that strategic policy frameworks exist and are combined with effective oversight, coalition-building and regulation. It entails an intrinsic aspect of project administration that concerns the management of relationships between various stakeholders including individuals, households, communities, governments, nongovernmental organisations, private firms and other entities that have the responsibility to finance, monitor, deliver and use



Aneotah Egbe Systems Strengthening Specialist

health services.

The systems strengthening component of the SHiPS for MARPs project seeks to promote common understanding of core issues, address new challenges and set priorities in line with project goal and objectives in a bid to enhance the quality of service delivery, including collaboration and partnerships.

The project outcomes are closely tied to the performance of partner CSOs and by extension the level of competence demonstrated by the collaborating SACAs to effectively coordinate HIV/AIDS prevention efforts across states.

On the service delivery front, CSOs and Community facilitators are trained and mentored to provide technical leadership and supervise Peer Educators to deliver risk reduction interventions within MARPs communities. They are also expected to create demand for HCT and STI service uptake and strengthening referrals for other HIV and AIDS and reproductive health services not being provided by the project.

Data management is driven by the use of relevant tools and software such as Excel, Epiinfo, SPSS, and DHIS to facilitate the operationalisation of a robust Health Information Management System. Partner CSOs are trained and mentored on how to apply these

platforms for data collation and analysis.

Within the last three years of implementation, the SHiPS project has institutionalised structured interventions aimed at improving the organisational and service delivery capacities of partner CSOs. These include training, supportive supervision, mentoring and coaching.

Organisational capacity assessments have been undertaken at baseline and on an annual basis to provide empirical evidence for the development of capacity building plans and subsequent systems strengthening support to address identified gaps.

The project has recorded significant progress as shown by the results of the last annual assessment of SACAs and CSOs. Sustained effort will be key to ensuring that the project bequeaths a lasting legacy entrenched in improved service delivery, programme management, monitoring, evaluation, research, financial management and resource mobilisation capacity.

In the long run, SACAs will need to have a retinue of career staff who will grow on the job and not be seconded. This will aid to further sustain institutional memory and promote systemic culture of sustained improvement of a well coordinated HIV and AIDS Response across States.

SHiPS Project Marks Its Territories with Messages One Site at A Time



Wall mural in an intervention site in FCT depicting the importance of knowing ones HIV status.



Wall mural in an intervention site in FCT promoting condom use.

During the first quarter of the year, the SHiPS project engaged with its target populations to get their input on its branding and marking plans, particularly in developing branding messages for the various intervention sites across the eight project states. This exercise of marking sites with messages is aimed at improving knowledge on HIV and AIDS, addressing stigma and discrimination, creating awareness and demand for services and increasing the project's visibility.

Several focus group discussions were held with representatives of the target populations to ensure that developed messages were well understood, acceptable and culturally appropriate for the various communities. Messages developed were translated to Pidgin or indigenous dialects based on the preferences of the target populations. The inclusive nature of the exercise as well as visibly marking sites significantly increase the sense of ownership and support for the project as expressed by the project beneficiaries.

In the Federal Capital Territory, marking commenced in FSW communities with wall murals depicting messages on HIV and STI prevention. So far, over seven intervention sites have been marked in the

FCT with many more to follow from the other project states.

Celebrating Zero Discrimination Day



"Some of the world's most challenging problems can be solved simply by eliminating stigma and discrimination."

- Michel Sidibé, Executive Director of UNAIDS

Zero Discrimination Day is a campaign about celebrating diversity and promoting individual dignity. The campaign was launched by the Joint United Nations Programme on HIV/AIDS (UNAIDS) with the butterfly adopted as its symbol for transformation. It was first celebrated on 1st March, 2014 by the United Nations and is observed on 1st March annually. According to Mr Sidibe, Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS), achieving zero new HIV infections and zero deaths due to AIDS can only be made possible through achieving zero discrimination. He added during the launch that "On Zero Discrimination Day, we will celebrate the rights of everyone to live a full and productive life with dignity".

This year's theme, "open up, reach out", was an invitation for people to unite globally and celebrate that which makes us different in a stance against discrimination.

"Some of the world's most challenging problems can be solved simply by eliminating stigma and discrimination," -Michel Sidibé, Executive Director of UNAIDS.

During this year's celebration, Dr. Bilali Camara, the UNAIDS Country Director for Nigeria and UNAIDS Focal Point for the Economic Community of West African States (ECOWAS), commended Nigeria for contributing to the fight to uphold people's basic human right with the passing into law of the anti-discrimination bill. He said, "This law is a big boost to improving Nigeria's AIDS response because it gives back human rights and dignity to people living with or affected by HIV and ensures that the country ends the AIDS epidemic by 2030".

On the SHiPS for MARPs project we understand the importance of diversity and actively promote gender equality throughout the project. In our own way, we have contributed to reducing stigma and discrimination against our target populations by ensuring diversity and gender mainstreaming throughout the project. We've taken it a step forward by training healthcare workers in our implementation states to offer friendly services to our target populations, who are often misunderstood and at the receiving end of stigma and discrimination. We believe strongly that there needs to be a radical change in our attitudes towards HIV and AIDS in Nigeria, particularly how People Living with HIV and AIDS are treated.

Increasing the Critical Mass of Grassroots HIV Counsellor-Testers

With the addition of the HIV counselling and testing component to the SHiPS for MARPs project, the project commenced a 10-day training of HIV Counsellor-Testers in Calabar, Cross River State and Makurdi, Benue State. Participants were selected from CSO partners, peer educators, members of MARPs communities and community facilitators. With the conclusion of the second batch of training which was conducted this quarter, the project has trained over 100 HIV counsellor-testers to provide HCT services to target populations.

Participants were trained using the nationally approved curriculum such that in the first week they were taken through techniques and skills in pre - and post-counselling with role plays used to reinforce knowledge. The second week exposed participants to the practical aspect of HCT; that is, actual testing for HIV using standard test kits as approved by the Federal Ministry of Health (FMoH). During the field work to communities, each participant had the opportunity to counsel and test willing persons in the communities visited. Tools for reporting during HCT provision were also covered during the training.

As newly trained counselor-testers, with skills yet to be honed, participants will be attached to seasoned counsellors in their respective states for adequate monitoring and supervision.



A cross-section of participants taking their oaths as HCT Counsellors



Mr. Teleh, Lead Facilitator, delivering a session



Hands-on finger pricking Practice



Participants practicing using HIV rapid test kits



Participants in a post-test counselling roleplay session

SHiPS M&E Supports Development of SACAs

The SHiPS for MARPs project, through its Research unit, conducts yearly assessment of State Agencies for the Control of AIDS (SACAs) in its focal States. The assessment reviews available Monitoring and Evaluation (M&E) systems in the States for the basic elements an effective M&E system should have; which ultimately aids evidence-informed MARPs programming. This year was no different as the yearly assessment was conducted in the 8 SHiPS project states - Akwa Ibom, Benue, Cross River, FCT, Lagos, Kaduna, Nassarawa, and Rivers.

Across board, some of the key findings from the assessment revealed that SACAs in these 8 states have functioning M&E Technical Working Groups (TWG), except in Nasarawa State, and functioning computer systems for data storage and retrieval, except in Cross River State. However, they lack a mechanism for tracking grassroots ease of access to and use of data, and some lack relevant national survey documents such as NARHS, IBBSS and NDHS; which contain important statistics to guide planning, management and implementation of HIV programmes.

Following from this year's assessment, the SHiPS project Research unit came up with plans of action through which it intends to assist these SACAs improve their M&E systems including making available national survey documents to guide programming; working with SACA strategic knowledge management unit to setup a system to track access to and use of data; providing training on DHIS, indicators and research tools among others.

Resource Mobilisation from the SHiPS Project Perspective



"This training has made me a better Executive Director as I now have a better understanding of resource mobilisation and proposal writing." The HIV & AIDS response in Nigeria is burdened with achieving long-term sustainability, due largely to increasing needs and emerging resource gaps, and the fact that over the years, Nigeria has been highly dependent on international donors for financial support. It is in recognition of the foregoing that the government adopted four strategic pillars for Resource Mobilisation (RM) for HIV&AIDS programming in Nigeria.

Being a HIV prevention project with a large systems strengthening component, the SHiPS for MARPs project is operationalising these pillars by training its key stakeholders on resource mobilisation. The Resource Mobilisation training was held in Abuja from March 23rd to 25th with a total of 26 participants in attendance. These participants were drawn from partner Civil Society Organisations (CSOs), State Agencies for Control of AIDS (SACAs) and Nigeria Sex Worker Association (NSWA).

Specifically, the three-day training introduced participants to current knowledge and practices on RM for HIV programming to help sustain community level activities. Primary objectives of the training were, to enhance participants' understanding of key concepts in RM; develop effective and efficient strategies that will lead to increased funding of HIV and AIDS activities by Government and private sector; as well as enhance participants' capacity to identify and develop result oriented RM strategies. At the end of the training, participants' grouped by CSOs and SACAs developed a draft operational plan spanning two years.

It is expected that from learning received during the workshop participants will leverage, harmonise and coordinate resources to implement HIV and AIDS interventions in their respective states, with the SHiPS project providing ongoing support as needed.

Generally, participants' appreciated the learning received from the training as indicated by testimonials received.

"This training has made me a better Executive Director as I now have a better understanding of resource mobilisation and proposal writing."

Another participant stated, "the session on proposal writing introduced me to the items and requirements needed to write a good proposal."



Facilitator giving a presentation during the training



Participants deliberating over a group task



Participants in a role-play session to showcase newly acquired advocacy skills



USAID's Agreement Officer Representative for the project giving the opening remarks

Collaborating for Development



FCT Agency for Mass Education (FAME) zonal office and centre

As part of efforts towards improving the quality of life of Female Sex Workers (FSWs) in the FCT, the SHiPS project team in FCT collaborated with the FCT Agency for Mass Education (FAME) to enroll FSWs in its literacy programme with the aim of reducing their vulnerabilities by improving power imbalances between them and their male clients, and to enable them make better decisions for their future.

Placement tests were used to ascertain individual level of education before enrollment into the programme with the first sets of enrollment occurring between February and March 2015. For this period, a total of 16 FSWs were enrolled and registered under FAME Abuja municipal area council zonal office.

During implementation of interventions in communities in FCT it became obvious that some FSWs desire to get formal education, however, the bureaucratic processes involved in school stands as a huge obstacle and deters them from trying. It was for this reason that the FCT SHiPS team decided to work with FAME to address this issue. The team is therefore hopeful that this pioneer set of enrollees would act as motivation to their peers to register for the programme. The Team is currently mobilising FSWs from other Area Councils in the FCT to join the literacy programme. "Before this intervention, I did not know how to set goals for myself but now I have been enrolled in the primary school. At least, I can read two letter words and three letter words." – 25 year old FSW

"Before this programme, I have no hope that I can learn skills such as the one I am learning now but now I have the hope that when I have finished , I can earn money for myself and stop this ASHAWO work."

– 23 year old FSW

SHiPS STORIES

Rediscovering Hope



Floxy in catering school in Lagos State

Florence, popularly called Floxy, is a female sex worker in Lagos State, a mother of two and a widow. She has been a sex worker for 10 years. According to Floxy she went into sex work as a means to an end; the end being to fend for herself and her children after the loss of her husband. Like many Nigerian women, Floxy is ambitious. She always had the dream of becoming a caterer and owning a catering business. However, with her husband's passing it became increasingly difficult to fend for herself and her children; and with this the dream was forgotten. In spite of the rigours of sex work, Floxy always makes out time for her two children by ensuring she spends more time with them than as a sex worker.

Her inquisitive nature led her to enroll as a peer under a trained Peer Educator (PE) when the Strengthening HIV

Prevention Services for Most at-risk Populations (SHiPS for MARPs) Project commenced HIV prevention interventions in her brothel. Floxy showed exceptional commitment to attending and participating in sessions, which later led her to be recruited as a PE for the successive phase of the project's intervention. Through her interaction with the project, Floxy gained new insights from sessions held on "Goal setting", "decision making and managing resources", and rediscovered her long forgotten dream of making more of her life.

"Being in sex work for over 10 years with nothing substantial to show for it was so depressing because I had a goal but never knew how to attain it until I came in contact with the programme. It (programme) found a way out for me and today I am made!"

With this new found hope, Floxy began saving money towards the purchase of equipment for the catering business. She did not lose sight of her responsibilities as a PE and continued giving and monitoring risk reduction sessions in 4 brothels in the locations the project had finished its intensive phase activities. During this time, through the project facilitator's guidance, she rented a shop space in the area where her brothel is situated and has since commenced her business.

Today, Floxy has a viable catering business and is registered in a catering instructing school to receive training on modern confectionaries. She hopes that with this added skill she can take her catering business to the next level. She is very excited about her future.

USEFUL INFORMATION

Use of Synthetic Antibodies against HIV in Humans Shows Promise

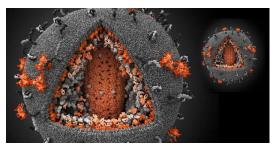


Photo courtesy www.avert.org

"What's special about these antibodies is that they have activity against over 80 percent of HIV strains and they are extremely potent," says Marina Caskey, co-first author of the study. The first trial of a newly designed HIV therapy made from synthetic antibodies has shown success and could potentially lead to a vaccine to prevent the disease. The study conducted by Researchers in Rockefeller University and published in *Nature* revealed that at the highest dosage the synthetic antibodies significantly reduced the amount of the virus in an infected person's blood.

The antibodies from which the synthetic antibody was cloned are known as 3BNC117 and are designed to target the primary protein receptor on HIV which is the entry point through which the virus enters the human body. Basically, the synthetic antibody attaches itself to the protein receptor on the surface of HIV making it difficult for the virus to connect to blood cells.

To read more on this study go to www.sciencedaily.com/releases/2015/04/150408133040.htm.

ANNOUNCEMENTS

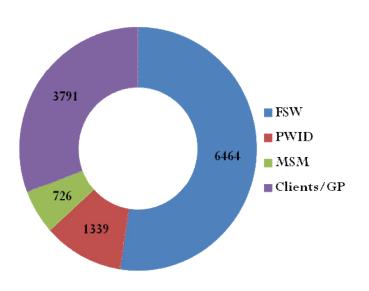
International Conferences

- 8th International AIDS Society (IAS) Conference HIV Pathogenesis, Treatment and Prevention 19th to 22nd July, 2015 Vancouver, British Columbia, Canada For more information, visit www.ias2015.org
- 18th International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) HIV and AIDS in post2015 Era: Linking Leadership, Science and Human Rights 8th to 3rd December, 2015 Tunis, Tunisia For more information, visit www.icasa2015tunisia.org

STATISTICS

Data on SHiPS HIV Counselling and Testing Service

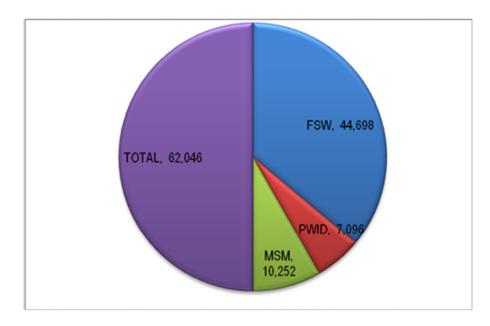
Number of Individuals Reached with HCT Services (October 2014 - March 2015)



In the period from October 2014 to march 2015, the SHiPS for MARPs project provided HIV Counselling and Testing (HCT) services to a total of 12,320 individuals as shown in the pie chart, with more Female Sex Workers receiving services.

*GP: General Population

Number of MARPs Reached with Minimum Prevention Package Interventions as at March 2015



As at March 2015, the SHiPS project reached more Female Sex Workers with Minimum Prevention Package of interventions than other project target groups as indicated in the pie chart.

TRIVIA

Answers to Issue 1 Trivia

1. AIDS was first reported in Nigeria in 1985.

2. Which is most effective at preventing pregnancy, HIV and other sexually transmitted infections?

Answer: Condoms and lubricants. Condoms are the only type of contraception that reduce both your chance of becoming pregnant and your risk of becoming infected with STIs. Lubricants should be used with condoms to reduce the risk of them breaking.

3. Can a female condom be used several times?

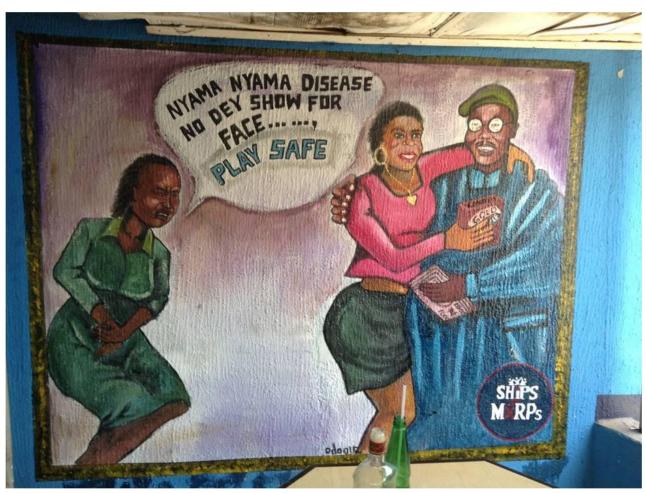
Answer: No. Both male and female condoms should only be used once.

4. HIV is believed to have evolved from a similar virus found in which animal?

Answer: Chimpanzee. The SIV virus found in chimpanzees is very close to HIV. It is believed that the virus crossed species to humans.

Issue 2 Trivia

1. Monogamy is when you	A. Have one sexual partnerB. Decide not to have sex with anyoneC. Have sex with many different people
2. Which normally rare cancer is often associated with AIDS?	A. Squamous Cell CarcinomaB. MesotheliomaC. Kapoosi's Sarcoma
3. Where does latex used to make condom come from?	A. FishB. OilC. Trees
4. Which is the most common STI transmitted through oral sex?	A. Hepatitis CB. ChlamydiaC. HIVD. Herpes
5. Which of the following can pass through latex condoms?	A. HIVB. SemenC. GonorrhoeaD. None of the above
6. If someone with HIV has a CD4 count of 350 or less, what does this mean?	A. Their immune system is very healthyB. They no longer have HIVC. They should probably start antiretroviral therapyD. They will die within a week



Wall mural promoting safe sex in a SHiPS intervention site in the FCT. Photo courtesy SHiPS FCT Field office

The Strengthening HIV Prevention Services for Most at Risk Populations (SHiPS for MARPs) project is a five-year HIV prevention project funded by the United States Agency for International Development (USAID), and implemented by a consortium of partners—Society for Family Health (www.sfhnigeria.org), Population Services International (www.psi.org), Population Council (www.popcouncil.org) and Centre for the Right to Health (crhnigeria.org); of which Society for Family Health is managing partner.

Have a news or story tip or question? Email us at ships4marpsng@gmail.com

Primary Business Address #8 Port Harcourt Crescent off Gimbiya street Area 11, Garki

Tel 1:+234 709 882 2791 Tel 2:+234 709 822 1447 Tel 3: +234 709 873 1139, e: ships4marpsng@gmail.com

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