

CONSOLIDATED REPORT ON COMMUNITY AND KVP ENGAGEMENT ACROSS NATIONAL, REGIONAL, AND STRATEGIC PROCESSES

1. Introduction and Rationale

Meaningful engagement of TB-affected communities and key and vulnerable populations (KVPs) is essential to ensuring that TB and HIV responses are rights-based, responsive, and effective. During the reporting period, the organisation supported and facilitated community participation across three critical platforms: national accountability processes, regional and global advocacy spaces, and national strategic planning mechanisms.



This consolidated report documents how TB Champions and KVP representatives were engaged in:

- a. KVP observance and participation within the Country Coordinating Mechanism (CCM) processes
- b. Representation at the International Conference on AIDS and STIs in Africa (ICASA)

- c. Inclusion of TB-affected community members in the End-Term Review (ETR) of the HIV and TB National Strategic Plans

Together, these engagements demonstrate a structured approach to strengthening community voice across policy oversight, advocacy, and strategic decision-making, with direct relevance to future Global Fund programming and Grant Cycle 8 (GC8).

2. Community and KVP Engagement in National Accountability Processes: CCM Observance

2.1 Purpose of Engagement

The participation of KVP representatives in CCM observance processes was aimed at strengthening community oversight and accountability within national decision-making structures. The CCM remains a critical platform for Global Fund governance, and meaningful KVP engagement is necessary to ensure that funding decisions reflect the realities of communities most affected by TB and HIV.



2.2 Nature of Participation

KVP representatives observed and engaged with CCM processes, gaining exposure to discussions on funding priorities, programme performance, and implementation challenges. This engagement supported:

- i. Increased understanding of CCM roles and decision-making processes
- ii. Strengthened capacity of KVPs to interpret programme and budget discussions
- iii. Improved linkage between community priorities and national funding oversight

2.3 Contribution to Community Systems Strengthening

Through CCM observance, KVP representatives were better positioned to engage constructively in policy dialogue and advocate for community-responsive programming. This participation laid a foundation for informed community input into subsequent national and global processes, including ICASA and the NSP review.

More Photos:

<https://drive.google.com/drive/folders/1g4W1qWv00l3QUYITXqN4W3Ymo92sb9G>

3. Regional and Global Advocacy: TB Champions and KVP Representation at ICASA

3.1 Purpose of Participation

Participation of TB Champions and KVP representatives at the ICASA conference was intended to amplify community voices within a regional and global advocacy space, while strengthening knowledge, visibility, and networks related to TB, HIV, human rights, and community-led responses.

3.2 Key Activities and Engagements

TB Champions and KVP representatives:

- i. Participated in conference sessions related to TB, HIV, community systems, human rights, and key populations
- ii. Engaged extensively with exhibitors, exchanging experiences, tools, and best practices
- iii. Mounted and managed a booth at the Community Connect section, where they interacted directly with delegates

At the booth, participants:





- i. Shared information about the organisation’s mandate and community-led TB work
- ii. Engaged delegates in conversations on TB prevention, treatment, and stigma
- iii. Facilitated an interactive activity where delegates wrote messages on sticky notes aimed at busting common TB myths
- iv. Distributed souvenirs to support visibility and awareness creation

3.3 Outcomes of ICASA Participation

Participation at ICASA strengthened:

- i. Advocacy skills and confidence of TB Champions and KVP representatives
- ii. Regional and cross-sectoral networking
- iii. Visibility of community-led TB responses within broader HIV and health discussions

The experience also reinforced the importance of integrating TB messaging into wider HIV and development platforms.

More Photos:

<https://drive.google.com/drive/folders/1vGFKFLPwIF5FxmKCNgqe3wEEgfQ8ZKz7>

4. Strategic Engagement: Inclusion of TB-Affected Communities in the NSP End-Term Review

4.1 Purpose of Community Inclusion

The inclusion of TB-affected community members in the End-Term Review (ETR) of the HIV and TB National Strategic Plans was designed to ensure that lived community experiences directly informed national strategic planning. Importantly, this engagement also aimed to contribute to the development of the next National Strategic Plan (2026–2031) and inform priority setting for Global Fund Grant Cycle 8 (GC8).

4.2 Process and Participation

Community participation followed a structured process:

- i. Orientation (14 November 2025): TB Champions and community representatives were oriented on the NSP, ETR objectives, and their roles



- ii. Field Visits (17–21 November 2025): Community members participated as part of the Greater Accra and Eastern Region ETR field teams, engaging in facility assessments, interviews, and focus group discussions
- iii. Thematic Review Meeting (25–26 November 2025): Community representatives contributed to two days of thematic discussions to validate findings and identify priority gaps

TB Champions were also interviewed during the field visits, providing insights into community-level TB prevention, treatment adherence, stigma, and loss to follow-up.

4.3 Key Gaps Raised by TB-Affected Communities

Community participation highlighted persistent gaps, including:

- i. Declining TB awareness and limited community sensitisation
- ii. Stigma and discrimination affecting care seeking and adherence
- iii. Gender-related barriers, including GBV and power imbalances
- iv. Limited awareness of human rights, PSEAH, and reporting mechanisms
- v. Weak community systems contributing to loss to follow-up

4.4 Actions and Outcomes Linked to Identified Gaps

In response to these gaps:

- i. Stakeholder engagements were initiated to register a Media Coalition on TB, being expanded into a TB, HIV, and Malaria Media Coalition to strengthen sustained awareness creation
- ii. Trainings for journalists, health workers, and TB Champions included sessions on TB and Gender to address gender-related barriers
- iii. Cascading “Breaking Down Barriers to Human Rights” trainings were conducted with TB Champions, covering GBV, IPV, and PSEAH
- iv. The role of TB Champions in treatment literacy, adherence support, and stigma reduction was strengthened

These actions demonstrate how community participation translated into practical responses aligned with NSP and GC8 priorities.

More Photos: https://drive.google.com/drive/folders/11AnP0DZXma3-YdAnX-qV43NKKNVv_B-z

Impacts and Outcomes of Community and KVP Engagement

The structured engagement of TB Champions and KVP representatives across CCM observance, ICASA participation, and the NSP End-Term Review resulted in clear and measurable outcomes that strengthened community systems, informed strategic planning, and improved the quality of advocacy and accountability within national TB and HIV responses.

1. Strengthened Community Influence on National Decision-Making

- i. TB Champions and KVP representatives gained practical exposure to national governance and funding processes through CCM observance, improving their ability to engage in informed dialogue on programme performance and resource allocation.
- ii. Community perspectives raised through these engagements contributed to stronger visibility of TB and KVP priorities within national accountability discussions, particularly around stigma, loss to follow-up, and community systems strengthening.

- iii. Community inputs from the NSP ETR are now positioned to inform the development of the next National Strategic Plan (2026–2031) and priority setting for Global Fund Grant Cycle 8 (GC8).

Outcome: Community voices moved from informal advocacy to structured input into national planning and financing processes.

2. Improved Quality and Consistency of Community-Led Advocacy

- i. Participation in ICASA strengthened the advocacy skills, confidence, and technical understanding of TB Champions and KVP representatives.
- ii. Engagement with regional and international stakeholders exposed participants to best practices in community-led TB and HIV responses, digital tools, and rights-based approaches.
- iii. The Community Connect booth increased visibility of community-led TB work and generated direct dialogue with delegates on TB myths, stigma, and prevention.

Outcome: Community representatives are better equipped to represent TB-affected communities in national, regional, and global spaces with clarity and confidence.

3. Increased Visibility of TB Within Broader HIV and Health Platforms

- TB messaging was actively integrated into broader HIV and health discussions through ICASA engagements and media-facing activities.
- The initiation of a Media Coalition on TB, expanding to include TB, HIV, and malaria, directly responds to identified gaps in sustained awareness creation.

Outcome: TB is increasingly positioned as a cross-cutting public health and human rights issue rather than a siloed disease.

4. Strengthened Gender and Human Rights Integration in TB Programming

- i. Gender and human rights gaps identified during the NSP ETR informed the



inclusion of TB and Gender sessions in trainings for journalists, health workers, and TB Champions.

- ii. Cascading “Breaking Down Barriers to Human Rights” trainings improved community-level understanding of

GBV, IPV, and PSEAH, and strengthened referral and reporting pathways.

Outcome: Community actors are better prepared to identify and respond to gender- and rights-related barriers affecting TB prevention, treatment, and care.

5. Enhanced Community Capacity to Address Stigma and Loss to Follow-Up

- i. TB Champions reported improved confidence in addressing stigma, treatment literacy, and follow-up within communities.
- ii. Community engagement activities strengthened trust between TB Champions, health facilities, and affected individuals, supporting adherence and continuity of care.

Outcome: Community systems are more responsive and better positioned to support retention in TB care.

6. Clear Linkage Between Community Engagement and Grant Readiness

- i. Evidence generated through community participation in CCM observance, ICASA, and the NSP ETR provides concrete justification for community systems strengthening, human rights programming, and awareness creation within GC8 grant proposals.

- ii. Documented community gaps and responses strengthen the credibility of funding requests by demonstrating alignment between identified needs and proposed interventions.

Outcome: Community engagement directly contributes to stronger, evidence-informed Global Fund GC8 grant writing.

Overall Result

The combined engagements transformed community participation from one-off representation into a coherent pathway of influence across accountability, advocacy, and strategic planning. TB Champions and KVP representatives are now better positioned to shape national TB and HIV responses, while programme decisions and funding priorities are increasingly grounded in lived community realities.

6. Conclusion

The consolidation of these three engagements demonstrates a deliberate and strategic approach to community participation. By supporting TB Champions and KVP representatives to engage across accountability, advocacy, and strategic planning platforms, the organisation has strengthened community influence on national and global TB and HIV responses. This approach directly supports the development of a more inclusive National Strategic Plan (2026–2031) and contributes evidence and community priorities to the Global Fund Grant Cycle 8 process.