

# Virtual Retreat for Stakeholders to Plan COP 21

## 27 January 2020

Topics	Speakers
Opening / Introductory Notes	Jacquelyn Sesonga - PEPFAR
Presentation and Facilitation	Jacquelyn Sesonga/Silva Mulambo
Presentation and considerations about the retreat program	Jacquelyn Sesonga - PEPFAR
Civil Society priorities for COP 21	Silva Mulambo - PLASOC
Overview of the COP Planning Level Chart	Jacquelyn Sesonga - PEPFAR
Final Considerations	Jason Bowman – SGAC HQ Dr. Francisco Mbofana - CNCS Jacquelyn Sesonga - PEPFAR

Introductory notes and overview of the retreat: Jacquelyn Sesonga



Note: the complete presentation can be found [here](#)

### Questions and comments

Dr. Mbofana:

- Stated he was concerned that, at a certain stage during the presentation of the agenda, he had read about a meeting with the Global Fund, being a reference to the involvement of the Country Coordinating Mechanism (CCM). He requested that the CCM be included in the PEPFAR and Global Fund discussions.
- He also showed concern with the appointment of MOH's Prevention Groups. He said, at the time, that the group is not exclusive to MOH. He recommended that the Government's prevention group be appointed because CNCS also has a prevention group.
- In section V, with regard to Civil Society, Dr. Mbofana pointed out that one should talk about the Health System and the Community. Strengthening community systems should be discussed.

Jacquelyn Sesonga:

- Noted that the meeting with the Global Fund will not be solely between PEPFAR and the Geneva Global Fund.
- Mentioned that Dr. Kirsi attended that morning and that everyone was aware that this meeting will also include representatives of the CCM and the stakeholders from the main recipients. Government's leadership will be provided.
- With regard to the technical area groups, she noted that we can correct the slide to make it clear that they are not just MOH technical groups but also country groups.
- With regard to the community systems, she noted that there was a meeting on the same day to draw up a specific agenda that was discussed with representatives of the CNCS, UNAIDS, PLASOC... She explained that an agenda will be shared with a working group that will focus on the community systems. She also explained that there will be time in the afternoons for groups to meet and talk specifically about community work, but in other technical groups there are community aspects that will be included.

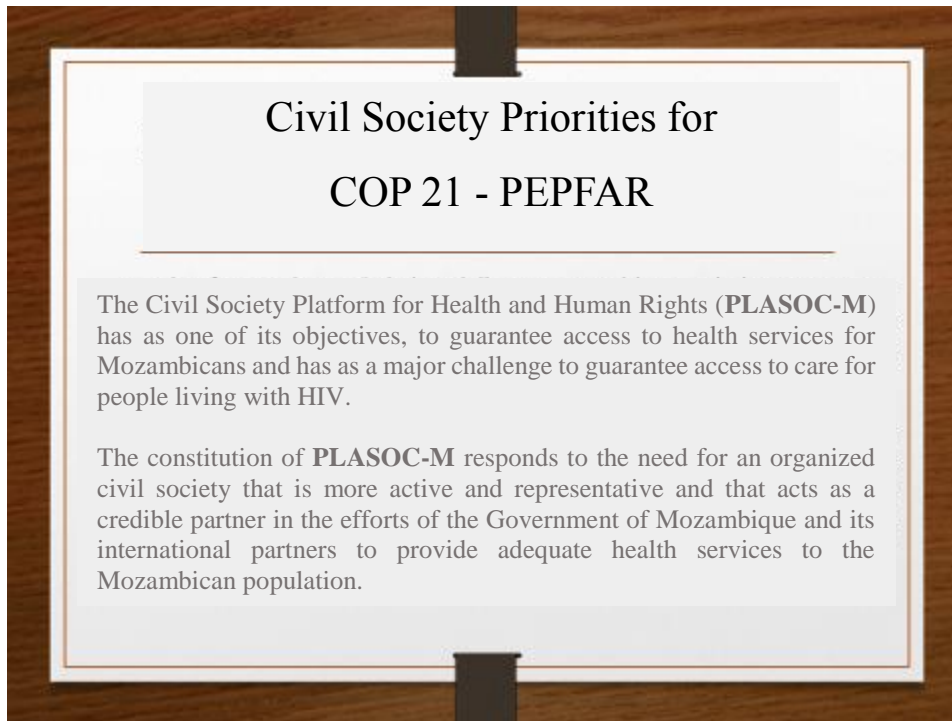
Kirsi Viisainen:

- Emphasized Jacquelyn's remarks, stating that we are discussing the topics to be included because aspects regarding coordination could be raised in the thematic areas that are in the program. We moved it to next week to have more time to prepare for this discussion.

Dr. Mbofana:

- Insisted on the following: If you had a meeting this morning, the CCM was not invited to that meeting. If we are talking about coordination, we should also coordinate the planning of the meetings.
- In relation to the community, I would like to point out that the issues of health systems and community systems should be discussed together, because they complement one another. The idea of someone from the community systems being in other TWG never worked. How are we going to discuss health systems on one side and community systems on the other side? There may be no linkage.

## Civil Society Priorities Presentation - Silva Mulambo



Note: the complete presentation can be found [here](#)

### Questions and comments

Silva Mulambo:

- Pointed out that at this moment, Civil Society is the stakeholder with the least human, technical, and financial resources, despite its relevance in the response to HIV in the country.
- Also pointed out that we needed more time to deepen our priorities and that the presentation made may be edited and updated.

Gilda Jossias:

- Shared that that Silva Mulambo is PLASOC's Executive Secretary, new to the job.
- Reiterated the need for funds to strengthen civil society activities. She said that PEPFAR could consider support to create a structure, as promised at COP 20.

Jacquelyn Ssonga:

- With regard to Civil Society's position, advised that PEPFAR and Civil Society should create joint funding strategies.
- Noted she has requested support from UNAIDS, CNCS and other partners in this regard.
- Stated that the CNCS, as a coordinating body, can assist in the fundraising component.
- Stated that "together we can work to support the civil society but, I agree that PEPFAR as a whole has made a commitment to always consider how important the civil society is in its response and has to lead some areas for which it needs funding".

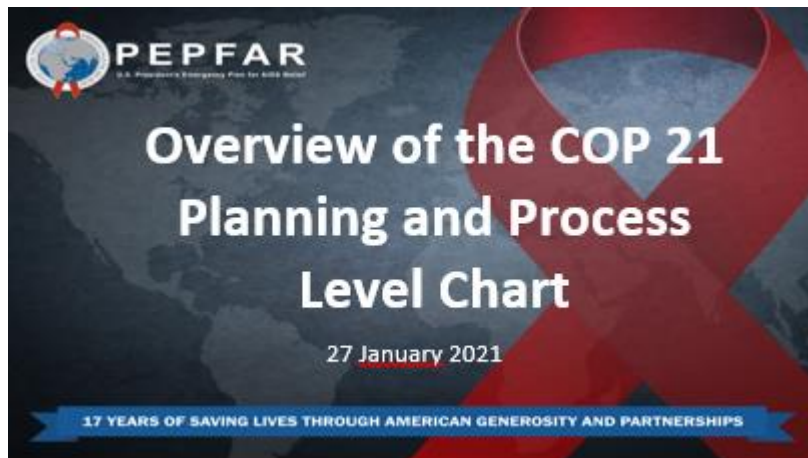
Professor Joaquim:

- Asked: In the COP 20 year there was an initiative to support 3HP. What is the current situation regarding this issue?

Yagna Varajidas - CDC

- Said that for COP 20 the purchase of 3HP had been budgeted but, due to COVID, it is a challenge to get 3HP into Mozambique. We are waiting for it to arrive. The pilot will now be used in Maputo and Gaza.

#### Overview of the Planning Level Chart: Jacquelyn Sesonga



Note: the complete presentation can be found [here](#)

Jason Bowman:

- In his presentation, noted that this virtual process is new and that we should take advantage of it. We will miss the specifics of the in-person meetings, but we will raise questions to ensure that everyone is listening and that we are aligned in the planning of the COP. We have very limited time but we hope that in February, when we meet again, we will have the opportunity to complete

this process. Please engage us in this space and let us know your ideas and solutions, particularly in this time of COVID.

Professor Joaquim:

- Asked about the lack of budget line for Community-Led Monitoring (CLM)

Jacquelyn Sesonga:

- When I was presenting the COP 21 budget, the budget lines that were shown for the program areas represent some fixed level budget lines that we have to reach within the 401 million dollars. However, the bulk of the budget is available for all programs and plans. CLM does not have a specific level of budget, yet we are not prevented from using part of the \$401 million for CLM. In COP 20 there were already some funds allocated for CLM so we will have to see how this can be done for COP 21. The Global Fund and other stakeholders are also investing in CLM but we will have to see how we can manage it better.

Dr. Feruccio (via chat):

- Thank you very much for the great and clear presentation. Is there any strategy to determine the social factors that maintain the high prevalence of HIV among young people? I am referring, for example, to collaborative initiatives between the health sector and education focusing on sexual education in schools for primary prevention, including the use of condoms, prevention of GBV and early marriage, etc.?

Paula Simbine:

- At the PEPFAR level, we have supported DREAMS and OVC programs, which include a range of initiatives with children, adolescents and young people, from health communication, screening, sexual and reproductive health, economic empowerment, and references to the Health Facility (HF), among others. PEPFAR's programs in these two areas are aligned with MOH's MHC and School Health programs. We have been developing specific interventions for adolescents and young people.

Paula Painsane:

- From the point of view of sustainability, the packages are aligned with the Schools and Adolescents Health Package, and are in collaboration with the Ministries of Education, Gender, Health, and the State Secretariat for Youth and Employment.

Jacquelyn Sesonga:

- The discussions of the technical areas groups on prevention will be interesting. The February 1 discussion will be a good opportunity to deepen these issues as well.

Prof. Joaquim Manhique:

- During the COP-21 period, Covid-19 will most certainly still be present. Any reason for this apparent omission?

Jason Bowman:

- Some resources have been made available to CDC and USAID to deal with Covid-19 issues. Last year, resources were made available to address Covid-19 issues and this will not change. PEPFAR resources will be used to adapt to the current context and will continue the efforts in the response to Covid-19. Even during the implementation of COP 21, resources will be made available so that people receive the treatments they need. There is no PEPFAR-specific budget line for Covid-19, but there is flexibility for adaptation.

Cesar Mufanequice:

- What is the reason for neglecting hepatitis C? Why is Mozambique on the fringes of this intervention? I think there is a need for bold interventions to combat hepatitis and non-communicable diseases.
- He added that he was working with UNIDOS and was concerned when he found that Mozambique was not a priority for the issue of hepatitis C at the COP. He said there are signs of hepatitis in drug users and we may have problems in the near future. Now that we have smaller numbers, we would be on the right track. In fact, we should already be thinking about what interventions we can do for key drug users.
- Regarding non-communicable diseases, how can PEPFAR strengthen the treatment of non-communicable diseases? How can the program address these issues?

Jacquelyn Sesonga:

- Suggested that we take a moment for Cesar to give a presentation to show the results of his work.

Cesar:

- Said that at the moment he had nothing to share, but that he would organize materials for this purpose.

Edson Lobo MP:

- At COP20, one of the initiated interventions was the strengthening of digital systems through (POC - Jembi) which was later stopped. Is there any plan to reintroduce this system at COP21?

Alfredo Vergara, CDC:

- We started this activity some time ago, but after trying to implement it for a few months we found that the system would not help with the initial goals, which was patient follow-up. The system would be very complex and we are not planning to continue it. However, we have been looking at other health systems and we have been working with DPC for the standardization of systems for HIV/AIDS patient to follow-up. There is no additional funding to continue with the POC System.

Hayley Bryant:

- I see in the planning letter the expectation of collaboration between clinical partners and OVCs. But the planning for OVCs and Pediatrics are separate....

Jacquelyn Sesonga:

- Reiterated that we will have the opportunity on days 1 and 2 to discuss aligning these areas in technical meetings to ensure we have these cross-cutting discussions.

Irriah Vitale:

- I understand that PEPFAR cannot integrate all the needs related to COVID-19 into the COP, however, it is important to ensure that there is sufficient IPC-related funding for PEPFAR-supported staff working at the HF level, as well as to ensure that the general IPC measures are in place at the HF level. Last year, we redirected funding from the program to support these activities.

Alfredo Vergara, CDC:

- Each clinical partner has the responsibility to provide this equipment where they operate. As workers are in many HFs, PEPFAR is not able to support everyone, but there has been an annual donation of protective equipment for workers. We have heard that there is stock in the country but there are challenges regarding the logistics of the distribution. We have to organize ourselves to take advantage of the resources available in an efficient way.

Jacquelyn Sesonga:

- Encouraged those with a specific topic to contact the PCO so that it can be fitted into the agenda for the next few days.

**Final considerations:**

In his closing remarks, Jason Bowman - SGAC, said:

Thank you to everyone who joined today, and in particular for the questions raised that will be important for discussion in the coming days and weeks. We encourage everyone to participate in these meetings and raise points to inform the COP planning. With the involvement of all stakeholders, well aligned, we will be able to arrive at a good outcome. May this engagement continue at the technical level. We have heard the points about Covid-19 and reinforce that it is PEPFAR's desire to do what we can to protect staff at all levels.

Dr. Francisco Mbofana, CNCS, said:

We have the responsibility to deepen the discussions. We have been in this process for years and we have improved every year in terms of our approach. We encourage everyone to continue having open and constructive discussions. On our side, we will always facilitate and support so that we have a COP. The COP is ours as a country, despite having funding from PEPFAR. The Country is us. We wish you all good work and we will be attentive to clear up any situation that does not allow us to move forward in the discussions. We are on a good path to control the epidemic by 2030. We cannot waver.

Jacquelyn Sessonga closed the meeting reiterating that the presentations and other important documents of the COP can be found on the website of the US Embassy, through this link [here](#).